### DLN: 93493320025826

OMB No 1545-0047

Department of the Treasury

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

▶ Do not enter social security numbers on this form as it may be made public

**Return of Organization Exempt From Income Tax** 

▶ Information about Form 990 and its instructions is at <u>www IRS gov/foim990</u>

nterna	al Rever	nue Serv	rice						
\ Fo	or the	<b>2015</b> c	alendar year, or tax year begin	ning 01-01-2015 , and ending 12-31-2	015				
_		plicable	C Name of organization AMERICAN GEOPHYSICAL UNION			D Emplo	yer i	dentification number	
_	ldress c	_				52-09	9555	532	
_	me cha	-	Doing business as						
_	ıtıal retu nal	urn				E Teleph		umbor	
	termina	ated	Number and street (or P O box 2000 FLORIDA AVE NW	if mail is not delivered to street address) Room/	'suite	E Telepii	Jile III	ambei	
Am	ended	return				(202)	462	2-6900	
App	olication	pending	City or town, state or province, of WASHINGTON, DC 20009	country, and ZIP or foreign postal code					
						<b>G</b> Gross	receip	ts \$ 51,346,433	
			F Name and address of prir	ncipal officer	H(a) I	s this a group	retu		
			2000 FLORIDA AVE NW		9	subordinates?		☐ Yes 🗸	
			WASHINGTON, DC 20009		<b>⊢</b> н(ы А	No Are all subord	ınate	!S —	
Tax	k-exem	pt status	5 <b>5</b> 501(c)(3) 501(c)()	◀ (insert no )	`	ncluded?		Tes   NO	
w	ebsite	:► ht	tp //sites agu org/			[f"No," attach	ı a lıs	st (see instructions)	
						Group exemp			
<b>(</b> Forn	n of org	anızatıo	n 🗸 Corporation 🗆 Trust 🗀 Ass	ociation Other ►	<b>L</b> Year	of formation 19	<del>)</del> 72	M State of legal domicile DO	
Do	rt I	6	n m 2 m/						
Pd			nmary	ion or most significant activities					
				RY IN EARTH AND SPACE SCIENCE F	OR THE BE	ENEFIT OF H	UMA	NITY	
ų									
É									
GOVERNANCE	2 -	hock t	his hov • 🗀 if the organization	n discontinued its operations or dispose	d of more th	han 25% of its	- not	accete	
2		. HECK L	ilis box P   Il the organization	raiscontinuea its operations of dispose	d of more ti	nan 23 % or it.	, nec	455015	
5 S	3 N	lumber	of voting members of the gove	erning body (Part VI, line 1a)			3	15	
, b	4 N	lumber	of independent voting member	rs of the governing body (Part VI, line 1	b)		4	15	
ACHANIES	5 T	otal nu	ımber of ındıvıduals employed ı	in calendar year 2015 (Part V, line 2a)			5	142	
֚֚֝֝֝֡֝֝֝֡֝֝֟֝	<b>6</b> ⊤	otal nu	ımber of volunteers (estimate i		6	21,000			
	7a ⊺	otal ur	nrelated business revenue from			7a	910,435		
	<b>b</b> Ne	et unre	lated business taxable income	from Form 990-T, line 34			7b	(	
						Prior Year		Current Year	
	8	Cont	ributions and grants (Part VIII	., line 1h)		4,195,	143	2,513,039	
<u>ج</u>	9	Progi	ram service revenue (Part VIII	[, line 2g)		28,577,	314	4 28,420,384	
Ravenue	10	Inve	stment income (Part VIII, colu	ımn (A), lines 3, 4, and 7d)		3,321,	3,321,795 2,681,		
æ	11	Othe	r revenue (Part VIII, column (	A), lines 5, 6d, 8c, 9c, 10c, and 11e)		745,	550	50 495,953	
	12	Total	revenue—add lines 8 through	11 (must equal Part VIII, column (A), I	ıne	36,839,	802	34,110,566	
		12)						· · ·	
	13			art IX, column (A), lines 1-3)		1,644,		556,124	
	14			rt IX, column (A), line 4)			0	0	
φ	15	Salar 5-10		oyee benefits (Part IX, column (A), line	S	13,808,	384	14,606,384	
Expenses	16a			IX, column (A), line 11e)			0	0	
e d	ь		fundraising expenses (Part IX, column				$\dashv$		
ă	17		- · · · ·	(D), line 25) 2,100,337 A), lines 11a-11d, 11f-24e)	-	17,087,	626	20,455,749	
	18			must equal Part IX, column (A), line 25		32,540,	-	35,618,257	
	19		·	ne 18 from line 12	· -	4,299,		-1,507,691	
χφ. * Φ			Jose expenses Subtract II						
Net Assets of Fund Balances					Beginn	ing of Current	Year	End of Year	
988	20	Total	assets (Part X, line 16) .			108,933,	050	102,638,088	
<u> </u>	21	Total	liabilities (Part X, line 26) .			17,560,	282	16,805,727	
ŽŢ	22	Neta	assets or fund balances Subtra	act line 21 from line 20		91,372,	768	85,832,361	
	t II		nature Block						
	•			examined this return, including accomp complete Declaration of preparer (other				•	
repa	rer ha	s any k	knowledge						
		***	· ** *			2016-11-15			
Sign	ı	Sıgı	nature of officer			Date			
lere		СНІ	RISTINE W MCENTEE CEO						
			pe or print name and title						
		<u>'</u>	Print/Type preparer's name	Preparer's signature	Date	Check I if	PTIN		
aic	t		Deborah G Kosnett	Deborah G Kosnett	2016-10-14	self-employed	P00:	290720	
	pare	r	Firm's name Tate and Tryon			Firm's EIN ► 5			
	Onl		Firm's address ► 2021 L Street NW S	urte 400		Phone no (202	<u>?</u> ) 293	-2200	
	• •	<b>,</b>	Washington, DC 20	0036					

. ✓Yes No

the total expenses, and revenue, if any, for each program service reported

) (Expenses \$

) (Expenses \$

) (Expenses \$

Other program services (Describe in Schedule O )

If "Yes," describe these new services on Schedule O

If "Yes," describe these changes on Schedule O

a single scientific tract and a narrow scope of content

(Code

(Code

(Code

See Additional Data

Total program service expenses ▶

(Expenses \$

4a

4b

Check if Schedule O contains a response or note to any line in this Part III . . . . . . . . . . . . . . . . .

11,471,641 including grants of \$

including grants of \$

including grants of \$

8,055,252

6,604,941

31,707,501

THE PURPOSE OF THE AMERICAN GEOPHYSICAL UNION (AGU) IS TO PROMOTE DISCOVERY IN EARTH AND SPACE SCIENCE FOR THE BENEFIT OF HUMANITY AGU GALVANIZES A COMMUNITY OF EARTH AND SPACE SCIENTISTS THAT COLLABORATIVELY ADVANCES AND COMMUNICATES SCIENCE AND ITS POWER TO ENSURE A SUSTAINABLE FUTURE

Did the organization undertake any significant program services during the year which were not listed on Tes √No

Did the organization cease conducting, or make significant changes in how it conducts, any program

Describe the organization's program service accomplishments for each of its three largest program services, as measured by

expenses Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, 18,313 ) (Revenue \$ 10,901,959)

MEETINGS - AGU has a diverse meeting portfolio that offers meetings of various sizes and formats. Most meeting participants present a poster and/or a talk on their latest scientific findings contributing to advancing Earth and Space science. Individuals must pay a registration fee to participate. The abstract submissions covering their presentations are published as part of the scientific program for each meeting and available via AGU's website. The AGU Fall Meeting is recognized as the leading meeting in the Earth and space sciences community with programming focused on inter- and multiple disciplinary sciences and policy and societal issues. It is the largest meeting in this field attracting more than 24,000 participants at the December 2015 meeting. The meeting generates hundreds of press and media stories about Earth and science sciences in prominent sources through distribution on the television, news print and through other electronic outlets. The Joint Assembly is a unique platform for scientists and researchers to connect with their Canadian and U.S. colleagues in an intimate setting. With more than 2,000

attendees, the meeting covers the entire Earth and space science spectrum but is small enough to allow for strong collaboration. In addition to a robust scientific program, attendees have the option to attend field trips, workshops, and short courses, covering a wide range of topics to spark scientific innovation and discussion The 2015 Joint Assembly was held in May 2015 in Montreal This meeting is cosponsored by AGU, Canadian Geophysical Union, Geological Association of Canada, and Mineralogical Association of Canada The Chapman Conferences are small topical conferences that focus on current and emerging science issues. Five Chapman conferences were held in 2015 in four different countries with attendance ranging between 70 - 120 participants. The 2015 AGU-SEG Workshop was held in August 2015 in Keystone, Colorado This yearly workshop, jointly sponsored by AGU and the Society of Exploration Geophysicists, brings 75 - 125 attendees together with

172,800 ) (Revenue \$ Marketing, Communication and Engagement - Marketing, communications and engagement programs seek to 1) build and maintain AGU's reputation as a leader, collaborator and sought after partner within and outside of the Earth and space science community, 2) promote AGU and its programs, initiatives and services to current and potential members, as well as to the broader Earth and space science community, and 3) educate the public, at all levels and across all sectors, on the

importance and impact of the Earth and space sciences, particularly as it relates to societal well-being. Major accomplishments in these areas during the 2015 fiscal year include expanding and elevating Eos org content (Eos is a website and bi-weekly magazine dedicated to providing news and perspectives about the Earth and

space sciences and their impact), and introducing a weekly email newsletter, relaunching AGU's Virtual Options (now AGU On Demand) program to included

streamlined content and an improved user experience, expanding programming offer by the Sharing Science program, which seeks to educate and empower scientists to share their knowledge with the public, and building its network of scientist participants, increasing mainstream and industry-specific media coverage of AGU and its science by nearly 20% over fiscal year 2014, increasing social media engagement across all AGU platforms, including a nearly 100% increase on

Facebook, and launching a new series of AMAs on Reddit, and exhibiting AGU membership/services/programs at least 7 industry-related events

) (Revenue \$

17,379,470) PUBLICATIONS - AGU PUBLISHES 19 JOURNALS REPRESENTING PEER-REVIEWED RESEARCH PAPERS AS WELL AS NUMBEROUS BOOKS. AND CO-PUBLISHES TWO OTHER JOURNALS WITH OTHER SOCIETIES THESE PUBLICATIONS COVER THE EARTH SCIENCES, PLANETARY SCIENCES, SOLAR-TERRESTRIAL AND SPACE PHYSICS, AND THE ENVRONMENTAL SCIENCES OVERALL, AGU JOURNALS PUBLISHED NEARLY 6000 PEER-REVIEWED PAPERS IN 2015 REPRESENTING NEW RESEARCH IN THE EARTH AND SPACE SCIENCES COVERAGE OF THE PAPERS HELPS MAKE THESE SCIENTIFIC STUDIES AVAILABLE TO THE PUBLIC, AND MANY OF THE PAPERS ARE

USED IN IMPORTANT ASSESSMENTS ALL AGU JOURNALS AND BOOKS ARE DISTRIBUTED ELECTRONICALLY VIA THE INTERNET, SOME STILL HAVE A MINOR PRINT COMPONENT ONE OR MORE OF THE PUBLICATIONS REACH EACH OF AGU'S MORE THAN 61.000 MEMBERS AGU PUBLICATIONS REACH MANY SCIENTISTS AND STUDENTS BEYOND THE AGU MEMBERHSIP, AS WELL AS OTHER MEMBERS OF THE PUBLIC, THROUGH MORE THAN 1,500 LIBRARIES WORLDWIDE THREE OF THE JOURNALS ARE FULLY OPEN-ACCESS, AND ALL OTHER AGU JOURNAL CONTENT IS FREELY AVAILABLE AFTER 24 MONTHS FULL-TEXT DOWNLOADS AVERAGED ABOUT 1,000,000 PAPERS PER MONTH WORLDWIDE IN 2015 PUBLICATIONS ARE AVAILABLE IN OVER 135 COUNTRIES, AND ARE AVAILABLE FOR FREE IN DEVELOPING NATIONS THROUGH RESEARCH4LIFE AGU PUBLISHES MORE THAN 50,000 PAGE EQUIVALENTS ANNUALLY

> 5,575,667 including grants of \$ 365,011 ) (Revenue \$ 145,437)

Form **990** (2015)

Par	t IV Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A 💆	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? $^{*}$	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part $I \stackrel{\text{def}}{=} I \cdot I $	3		No
4	Section 501(c)(3) organizations.  Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year?  If "Yes," complete Schedule C, Part II	4	Yes	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19?  If "Yes," complete Schedule C, Part III	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts?  If "Yes," complete Schedule D, Part I	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets?  If "Yes," complete Schedule D, Part III	8		No
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V 🔰	10	Yes	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable			
	Did the organization report an amount for land, buildings, and equipment in Part X, line 10?  If "Yes," complete Schedule D, Part VI	11a	Yes	
	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	Yes	
	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	<b>11</b> c		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	<b>11</b> d		No
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)?  If "Yes," complete Schedule D, Part X	<b>11</b> f		No
12a	Did the organization obtain separate, independent audited financial statements for the tax year?  If "Yes," complete Schedule D, Parts XI and XII	12a	Yes	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?  If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
14a		14a		No
D	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b	Yes	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16	Yes	 
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

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28a

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28c

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•	<b>,</b>		
ΙV	Checklist of Required Schedules	(continued)	5

1 01111	990 (2013)			Page 🕶
Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes	
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K If "No," go to line 25a	24a	Yes	
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		No
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	<b>24</b> c		No
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		No
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.  Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Pait I	25b		No
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current			

or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons?

Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial

contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family

**b** A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L,

c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was

Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M . . .

Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Pait I.

Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Pait II, III, or IV,

b If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled

an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV . . .

Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified

33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations

entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 . . . Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related

Did the organization conduct more than 5% of its activities through an entity that is not a related organization

and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI

sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I . . . . . . . . . . . . .

member of any of these persons? If "Yes," complete Schedule L, Part III . . . . . . . . . . . . . . Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV

a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L,

32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets?

35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?

instructions for applicable filing thresholds, conditions, and exceptions)

Νo Nο

Pai	rt V	Statements Regarding Other IRS Filings and Tax Compliance		.,			_
		Check if Schedule O contains a response or note to any line in this	Part	v			. L
1 >	Enter	the number reported in Box 3 of Form 1096 Enter -0- if not applicable	1a	153		Yes	No
		the number of Forms W-2G included in line 1a Enter -0- if not applicable	1b	153			
		e organization comply with backup withholding rules for reportable payments t					
С		e organization comply with backup withholding rules for reportable payments t g (gambling) winnings to prize winners?	. veno		1c	Yes	
2a		the number of employees reported on Form W-3, Transmittal of Wage and					
		tatements, filed for the calendar year ending with or within the year covered s return	2a	142			
h	•	east one is reported on line 2a, did the organization file all required federal em			2b	Yes	
		If the sum of lines 1a and 2a is greater than 250, you may be required to e-file					
3a	Dıd th	e organization have unrelated business gross income of \$1,000 or more durin	g the	year <sup>?</sup>	3a	Yes	
b	If "Yes	s," has it filed a Form 990-T for this year? <i>If "No" to line 3b, provide an explanat</i> .	on in S	Schedule O	3b	Yes	
4a	over,	, time during the calendar year, did the organization have an interest in, or a s a financial account in a foreign country (such as a bank account, securities ac			4-		
		nt)?			4a	Yes	
b	If "Ye	s," enter the name of the foreign country <mark>▶</mark> CA , UK Istructions for filing requirements for FinCEN Form 114, Report of Foreign Ban	kand	Financial Accounts			
	(FBAR		k and	i manciai Accounts			
5a	•	' he organization a party to a prohibited tax shelter transaction at any time duri	ng the	tax year?	5a		No
		ny taxable party notify the organization that it was or is a party to a prohibited	-	•	5b		No
		s," to line 5a or 5b, did the organization file Form 8886-T?			30		
-	1. 10.	-,	•		5c		
6a		the organization have annual gross receipts that are normally greater than \$1 ization solicit any contributions that were not tax deductible as charitable con			6a		No
b		s," did the organization include with every solicitation an express statement toot tax deductible?	hat su	ch contributions or gifts	6b		
	_	izations that may receive deductible contributions under section 170(c).					
	servic	e organization receive a payment in excess of \$75 made partly as a contributes provided to the payor?			7a		No
		s," did the organization notify the donor of the value of the goods or services p			7b		
	file Fo	e organization sell, exchange, or otherwise dispose of tangible personal properm 8282?		which it was required to	<b>7</b> c		No
d	If"Ye	s," indicate the number of Forms 8282 filed during the year	7d				
е	Did th	e organization receive any funds, directly or indirectly, to pay premiums on a	person	al benefit contract?	7e		No
f	Did th	e organization, during the year, pay premiums, directly or indirectly, on a pers	onal b	enefit contract?	<b>7</b> f		No
g	If the requir	organization received a contribution of qualified intellectual property, did the ded?	organız • •	zation file Form 8899 as	<b>7</b> g		
h		organization received a contribution of cars, boats, airplanes, or other vehicle 1098-C?	s, dıd •	the organization file a	7h		
8	Did a	oring organizations maintaining donor advised funds. donor advised fund maintained by the sponsoring organization have excess bu i the year?	ısınes:	s holdings at any time	8		
9a	Did th	e sponsoring organization make any taxable distributions under section 4966	? .		9a		
		e sponsoring organization make a distribution to a donor, donor advisor, or rel		erson?	9b		
10		on 501(c)(7) organizations. Enter	•				
а	Initiat	cion fees and capital contributions included on Part VIII, line 12	10a				
b	Gross facılıtı	receipts, included on Form 990, Part VIII, line 12, for public use of club les	10b				
11	Section	on 501(c)(12) organizations. Enter		,			
а	Gross	income from members or shareholders	11a				
b		income from other sources (Do not net amounts due or paid to other sources st amounts due or received from them )	11b				
12a	Section	on <b>4947(a)(1) non-exempt charitable trusts.</b> Is the organization filing Form 99	) in lie	u of Form 1041?	<b>12</b> a		
b	If "Ye: year	s," enter the amount of tax-exempt interest received or accrued during the	12b				
13	•	on 501(c)(29) qualified nonprofit health insurance issuers.					
а		organization licensed to issue qualified health plans in more than one state? I onal information the organization must report on Schedule O	lote. S	See the instructions for	<b>13</b> a		
b		the amount of reserves the organization is required to maintain by the states	13b				
_		ch the organization is licensed to issue qualified health plans					
		the amount of reserves on hand	13c	2	14-		N. o
		e organization receive any payments for indoor tanning services during the ta s," has it filed a Form 720 to report these payments? <i>If "No," provide an explan</i> i	•		14a 14b		No
U	11 16	5, has it med a form 720 to report these payments '11 No, provide difexpiant	acion n	Deficuate U	74D		

orm	990 (2015)					Page
Par	For each "Yes" response to lines 2 through 7b below, and for a "No describe the circumstances, processes, or changes in Schedule O. S.			or 10	Ob belo	w,
	Check if Schedule O contains a response or note to any line in this Part VI					[
Se	ction A. Governing Body and Management					
					Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	15			
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O					
b	Enter the number of voting members included in line 1a, above, who are independent	1b	15			
2	Did any officer, director, trustee, or key employee have a family relationship or a bus other officer, director, trustee, or key employee?		relationship with any	2		No
3	Did the organization delegate control over management duties customarily performe supervision of officers, directors or trustees, or key employees to a management co			3		No
4	Did the organization make any significant changes to its governing documents since filed?	the p	orior Form 990 was	4	Yes	
5	Did the organization become aware during the year of a significant diversion of the o	rganız	zation's assets?	5		No
6	Did the organization have members or stockholders?			6	Yes	
7a	Did the organization have members, stockholders, or other persons who had the pow more members of the governing body?			7a	Yes	
b	Are any governance decisions of the organization reserved to (or subject to approve or persons other than the governing body?			7b		No
8	$\mbox{\rm Did}$ the organization contemporaneously document the meetings held or written active year by the following	ons u	ndertaken during the			
а	The governing body?			8a	Yes	
b	Each committee with authority to act on behalf of the governing body?			8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, organization's mailing address? If "Yes," provide the names and addresses in Schedule			9		No
Se	ction B. Policies (This Section B requests information about policies not	requ	ired by the Internal R	even	ue Cod	e.)
			-		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?			<b>10</b> a		No

b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, 10b affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing 11a **b** Describe in Schedule O the process, if any, used by the organization to review this Form 990 **12a** Did the organization have a written conflict of interest policy? If "No," go to line 13 . . . **12**a Yes Were officers, directors, or trustees, and key employees required to disclose annually interests that could give 12b Yes c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe **12**c Yes Did the organization have a written whistleblower policy? . . . . . . . . 13 13 Yes Did the organization have a written document retention and destruction policy? . . . . . . . . . . . 14 Yes Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? **a** The organization's CEO, Executive Director, or top management official . . . 15a Yes 15b Yes If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a **16**a Νo **b** If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? . . . . . . . . . . . . . . . . . . 16b

# Section C. Disclosure 7 List the States with which a copy of this Form 990 is required to be filed▶

18

Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c
(3)s only) available for public inspection. Indicate how you made these available. Check all that apply
Cours website

| Own website | Another's website | ✓ Upon request | Other (explain in Schedule O)

.9 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year

State the name, address, and telephone number of the person who possesses the organization's books and records ►MICHAEL ANDREWS 2000 FLORIDA AVE NW WASHINGTON, DC 20009 (202) 462-6900

Part VII

#### Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated **Employees, and Independent Contractors**

Check if Schedule O contains a response or note to any line in this Part VII .

#### Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0 - in columns (D), (E), and (F) if no compensation was paid
  - List all of the organization's current key employees, if any See instructions for definition of "key employee"
- List the organization's five current highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's former officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees, and former such persons

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee

<b>(A)</b> Name and Title	(B) A verage hours per week (list any hours	more to	than o	one I both ector	box, an d	heck unless officer stee)		(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation from the
	for related organizations below dotted line)	individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	2/1099-MISC)	(W- 2/1099- MISC)	organization and related organizations
See Additional Data Table										

Part VII	Section A	Officers,	Directors,	Trustees,	Key Employees	, and Highest	Compensated	Employees	(continued)

		,				,					
<b>(A)</b> Name and Title	(B) Average hours per week (list any hours	Posit more t perso and a	tion ( han d n is l	ne b both	ox, ı an o	unless fficer		( <b>D)</b> Reportable compensation from the organization (W-	(E) Reportable compensation from related organizations (W-	(F) Estimated amount of other compensation from the	
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	2/1099-MISC)	2/1099-MISC)	organization and related organizations	
See Additional Data Table											
1b Sub-Total			•			<b>•</b>					
c Total from continuation sheet d Total (add lines 1b and 1c) .	•			· .	· .	<b>&gt;</b>		2,823,905	0	463,600	
2 Total number of individuals (inc \$100,000 of reportable compe						labov	e) wl	no received more th	an		

3	Did the organization list any <b>former</b> officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>	3	Yes	
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual	4	Yes	
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule I for such person	5		No

### Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

compensation from the organization. Report compensation for the calenda	r year ending with or within the organization's	tax year
(A) Name and business address	(B) Description of services	<b>(C)</b> Compensation
PROJECTION PRESENTATION INC	AV SERVICES	1,154,903
PO BOX 890472 CHARLOTTE, NC 28289		
VIRTUAL LOGIC GROUP	IS INFRASTRUCTURE UPGRADE/MAINT	811,731
4352 HUNTLEY CT WOODBRIDGE, VA 22192		
Freeman	Decorator Services	726,968
PO Box 650036 Dallas, TX 75265		
Association Development Solutions	Contract services for Development Direct	354,000
40 Shuman Blvd Naperville, IL 60563		
Choice Inc	Temporary help services	345,749
PO Box 62408 Baltimore, MD 212642408		

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ▶ 21

Yes

No

Form 99	0 (20	15)						Page <b>9</b>
Part V	1111	Statement o	f Revenue					
		Check If Schedu	ule O contains a respoi	nse or note to any lir	ne in this Part VIII  (A)  Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
0	1a	Federated cam	paigns 1a					
Gifts, Grants ilar Amounts	ь	Membership du	es <b>1b</b>	1,942,159				
Gra	С	Fundraising eve	ents <b>1c</b>					
iş.	d	_	ations 1d					
ig Gi		Government grants		144,543				
ns, Sim	е	_						
er S	f	All other contribution similar amounts no	ons, gifts, grants, and <b>1f</b> ot included above	426,337				
Contributions, Giffs, Grants and Other Similar Amounts	g		ons included in lines			İ		
Cont	h	1a-1f \$  Total. Add lines	: 1a-1f		2,513,039			
<u>ة ت</u>		Total: Add lines	, , , , , , , , , , , , , , , , , , , ,	· · · •	_,,			
<b>₹</b>	2a	PUBLICATIONS		Business Code 900099	17 272 000	16 511 446	861,542	
<u>ک</u> م	b	MEETINGS		900099	17,372,988	16,511,446	48,893	
υ Œ	c	SOCIETY ACTIVITIE	<u> </u>	900099	10,901,959 145,437	10,853,066 145,437	40,093	
<u>ح</u>	d	3001211 /101111111		300093	143,437	143,437		
₹	e							
ran	f	All other progra	am service revenue					
Program Service Revenue								
	g 3		s 2a–2f ome (including dividen		28,420,384			
			ar amounts)		1,556,879			1,556,879
	4		tment of tax-exempt bond	proceeds >	6 403	6 400		
	5	Royalties	(2) D = -1	►	6,482	6,482		
	6a	Gross rents	(ı) Real 489,471	(II) Personal				
	0.		,					
	b	Less rental expenses	0					
	С	Rental income or (loss)	489,471					
	d		me or (loss)		489,471			489,471
		_	(ı) Securities	(II) O ther				
	7a	Gross amount from sales of assets other than inventory	18,360,178					
	ь	Less cost or other basis and	17,234,271	1,596				
	_	sales expenses Gain or (loss)	1,125,907	-1,596				
	c d	Net gain or (los		·	1,124,311			1,124,311
enne/	8a	Gross income f events (not inc	rom fundraising luding		, ,			, ,
Other Revenue	L	See Part IV, lin	a					
ō	c		penses <b>b</b> (loss) from fundraising	Levents ▶				
	9a		rom gaming activities	· .				
	b c		penses <b>b</b> (loss) from gamıng actı	vities				
	10a	Gross sales of returns and allo						
	b	Less cost of g	oods sold b					
	С	Net income or (	(loss) from sales of inv	entory ►				
		Miscellaneous	s Revenue	Business Code				
	11a							
	b							
	С							
	d	All other reven						
	е	Total. Add lines		•				
	12	Total revenue.	See Instructions .	· · · · •	34,110,566	27,516,431	910,435	3,170,661

### Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A)

	✓				
	ot include amounts reported on lines 6b, o, 9b, and 10b of Part VIII.	(A) Total expenses	<b>(B)</b> Program service expenses	<b>(C)</b> Management and general expenses	<b>(D)</b> Fundraising expenses
1	Grants and other assistance to domestic organizations and				
	domestic governments See Part IV, line 21	133,215	133,215		
2	Grants and other assistance to domestic				
	ındıvıduals See Part IV, line 22	311,747	311,747		
3	Grants and other assistance to foreign organizations, foreign		•		
	governments, and foreign individuals See Part IV, lines 15				
	and 16	111,162	111,162		
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	2,244,577	1,261,960	929,376	53,241
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	9,409,584	5,550,170	3,627,572	231,842
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	712,179	366,580	329,326	16,273
9	Other employee benefits	1,425,546	133,269	1,283,628	8,649
LO	Payroll taxes		•		·
	·	814,498	482,423	311,983	20,092
L1	Fees for services (non-employees)				
а	Management	51,804		51,804	
b	Legal	208,863	33,764	175,099	
c	Accounting	133,260		133,260	
d	Lobbying	44,879	44,879		
е	Professional fundraising services See Part IV, line 17				
f	Investment management fees	366,642		366,642	
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	4,318,955	1,588,157	2,375,658	355,140
L2	Advertising and promotion	32,881	11,451		21,430
L3	Office expenses	1,366,133	965,378	383,329	17,426
L4	Information technology	1,228,034	217,786	994,020	16,228
L5	Royalties	18,719	18,275	444	
L6	Occupancy	978,515	495	978,020	
L7	Travel	1,674,074	1,042,112	579,645	52,317
L8	Payments of travel or entertainment expenses for any federal, state, or local public officials				
L9	Conferences, conventions, and meetings	5,597,239	5,107,705	210,442	279,092
20	Interest	170,780		170,780	•
21	Payments to affiliates	,		,	
22	Depreciation, depletion, and amortization	1,286,140	57,301	1,228,839	
23	Insurance	104,254	8,912	95,342	
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on	,	,	,	
	Schedule O )				
а	HONORARIA/CONTRIBUTIONS	1,168,440	1,120,591	11,449	36,400
b	PRODUCTION/PUBLICATIONS	874,882	866,116	4,987	3,779
c	OUTSOURCING & LOGISTICS	469,660	469,660		
d	ABSTRACT MANAGEMENT	201,854	201,814		40
е	All other expenses	159,741	11,602,579	-12,499,426	1,056,588
25	Total functional expenses. Add lines 1 through 24e	35,618,257	31,707,501	1,742,219	2,168,537
26	Joint costs.Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here ► ☐ if following SOP 98-2 (ASC 958-720)				

rt X	Balance Sheet			Page <b>11</b>
A	Check if Schedule O contains a response or note to any line in this Part X			
	eneek it beneathe of contains a response of note to any line in and rate x. 1. 1.	(A) Beginning of year		(B) End of year
1	Cash-non-interest-bearing	599	1	416
2	Savings and temporary cash investments	6,303,798	2	5,899,199
3	Pledges and grants receivable, net	291,597	3	9,545
4	Accounts receivable, net	3,518,958	4	2,011,122
5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L			
			5	
6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Pai II of Schedule L	t	_	
l _			6	
7	Notes and loans receivable, net		7	
8	Inventories for sale or use	224.472	8	
9	Prepaid expenses and deferred charges	384,470	9	551,050
10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D  23,007,75	3		
b	Less accumulated depreciation <b>10b</b> 15,768,73	5 8,137,861	10c	7,239,018
11	Investments—publicly traded securities	51,372,853	11	45,857,780
12	Investments—other securities See Part IV, line 11	37,698,873	12	39,836,633
13	Investments—program-related See Part IV, line 11		13	
14	Intangible assets		14	
15	Other assets See Part IV, line 11	1,224,041	15	1,233,325
16	Total assets.Add lines 1 through 15 (must equal line 34)	108,933,050	16	102,638,088
17	Accounts payable and accrued expenses	5,776,476	17	6,059,570
18	Grants payable		18	
19	Deferred revenue	882,279	19	2,273,908
20	Tax-exempt bond liabilities	4,965,000	20	4,505,000
21	Escrow or custodial account liability $\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \$		21	
22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified			
	persons Complete Part II of Schedule L		22	
23	Secured mortgages and notes payable to unrelated third parties $\cdot\cdot$		23	
24	Unsecured notes and loans payable to unrelated third parties		24	
25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D			
		5,936,527	25	3,967,249
26	Total liabilities.Add lines 17 through 25	17,560,282	26	16,805,727

83,508,577

7,258,771

91,372,768

108,933,050

605,420

27

28

29

30

31

32

33

34

78,478,298

6,731,023

85,832,361

102,638,088 Form 990 (2015)

623,040

Organizations that follow SFAS 117 (ASC 958), check here ▶ 🕡 and complete

Organizations that do not follow SFAS 117 (ASC 958), check here ▶

Paid-in or capital surplus, or land, building or equipment fund .

Retained earnings, endowment, accumulated income, or other funds

lines 27 through 29, and lines 33 and 34.

Unrestricted net assets .

complete lines 30 through 34.

Total net assets or fund balances

Temporarily restricted net assets

Permanently restricted net assets .

Capital stock or trust principal, or current funds

Total liabilities and net assets/fund balances

	1
	1:
	1 1 1
	14
	1
	1 1 1
	1:
	1
	20
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Net Assets or Fund Balances

27

28

29

30

31

32

33

34

1	Total revenue (must equal Part VIII, column (A), line 12)		
2	Total expenses (must equal Part IX, column (A), line 25)	1	
3	Revenue less expenses Subtract line 2 from line 1	3	
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	
5	Net unrealized gains (losses) on investments	5	
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	
Par	t XII Financial Statements and Reporting		
	Check if Schedule O contains a response or note to any line in this Part XII		
1	Accounting method used to prepare the Form 990	_	

Both consolidated and separate basis

Both consolidated and separate basis

Page **12** 

34,110,566

35,618,257

-1,507,691

91,372,768

-5,984,800

1,952,084

85,832,361

2b

2c

3a

3b

Yes

Yes

Nο

Form 990 (2015)

Par	t XII Financial Statements and Reporting			
	Check if Schedule O contains a response or note to any line in this Part XII			. 🗸
			Yes	No
1	Accounting method used to prepare the Form 990			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both			

If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate

c If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the

**b** If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits

If the organization changed either its oversight process or selection process during the tax year, explain in

Consolidated basis

Separate basis Consolidated basis **b** Were the organization's financial statements audited by an independent accountant?

basis, consolidated basis, or both

Single Audit Act and OMB Circular A-133?

✓ Separate basis

Schedule O

#### **Additional Data**

Software ID: Software Version:

EIN: 52-0955532

Name: AMERICAN GEOPHYSICAL UNION

#### Form 990, Part III - 4 Program Service Accomplishments (See the Instructions)

SOCIETY ACTIVITIES, START INTERNATIONAL ACTIVITIES AND MEMBERSHIP SERVICES

(Code ) (Expenses \$ 4.212.193 including grants of \$ 249,325 ) (Revenue \$ SCIENCE - The AGU Science Department is responsible for AGU talent pool and professional education programs - providing support to AGU members through all career stages, and for serving as focal point for scientific program-related activities which cut across AGU disciplines, including areas such as scientific ethics programs, honors and recognition programs for AGU members, and for AGU scientific initiatives such as the Thriving Earth Exchange Program. Key highlights for AGU talent pool programs in 2015 were a 50% growth in the AGU Student and Early Career Conference, introduction of an AGU meeting-mentorship program, and the introduction of a promising new program - the Virtual Poster Showcase - allowing students to present their research and receive feedback from anyplace across the globe Each of these three emerging new talent pool programs received strongly favorable feedback from participants to encourage continued growth AGU's student travel grant activities also expanded in 2015 AGU provided travel support for more than 225 students to participate in the 2015 Fall Meeting and provided all-expense paid full support to 18 Berkner students from developing nations to participate in the 2015 San Francisco AGU Fall Meeting and the 2015 Montreal Joint Assembly Meeting. This year also saw the growth of student and early-career member support through a special \$5000 allocation to each of the 23 AGU Section and Focus Groups to help encourage and support student program initiatives. The AGU Outstanding Student Paper Award program in 2015 enjoyed over 2600 student participants and engaged over 2000 volunteer judges. AGU's scientific partnerships expanded in 2015 to include programmatic activities with the International Association for the Promoting GeoEthics (IAPG), and new a partnerships with the American Society for Microbiology (ASM), leading to new joint-interdisciplinary scientific meeting activities. The AGU Thriving Earth Exchange program also grewits partnerships and impact in 2015, and is now providing solutions to more than 15 local communities across the globe, on issues associated with climate change, natural resource limitations and natural disasters 115,686 ) (Revenue \$ (Code ) (Expenses \$ 1,363,474 including grants of \$ 145,437 )

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest

Compensated Employees, and Independent Contractors										
<b>(A)</b> Name and Title	(B) A verage hours per week (list any hours for related	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the
		individual trustee or director	Institutional Trustee		Key employee	Highest compensated employee	Former	MISC)	мізс	organization and related organizations
Margaret Leinen President	8 00	x		x				0	0	0
Eric A Davidson President-Elect	5 00	x		×				0	0	0
Carol Finn Immediate Past President	5 00	×		×				0	0	0
Louise Pellerin General Secretary (Treasurer)	5 00	×		×				0	0	0
Susan Webb International Secretary	5 00	×		x				0	0	0
John Bates Director	5 00	×						0	0	0

5 00

5 00

5 00

5 00

Х

Robin Elizabeth Bell

Catherine Constable

Director

Director

Carlos Dengo Director

Rana A Fine Director

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest

69,149

36,086

40,689

28,443

Compensated Employees, and Inde					ı u.	stee	3, R	tey Employee	is, ilighest	
(A) Name and Title	(B) A verage hours per week (list any hours for related	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	MISC)	Miscy	organization and related organizations
Josh Greenberg Director	5 00	x						0	0	0
Seth Kahan Director	5 00	x						0	0	0
Kelly Klima Director	5 00	x						0	0	0
Cathryn A Manduca Director	5 00	x						0	0	C
Soroosh Sorooshian Director	5 00	x						0	0	0
CHRISTINE W MCENTEE  Chief Executive Officer	37 50			x				511,324	О	123,146

37 50

37 50

37 50

37 50

Х

Х

Χ

343,724

228,343

239,414

239,129

FRANK KRAUSE

MARK HERNICK

Royce B Hanson

Dana Rehm

Director, MCE

Chief Operating Officer

Chief Financial Officer

Director, Publications

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest **Compensated Employees, and Independent Contractors** 

16,704

17,235

8,188

4,190

156,311

146,387

190,238

100,559

Χ

Compensated Employees, and Independent Contractors											
(A) Name and Title	(B) A verage hours per week (list any hours for related	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)				box, both a	,	(D) Reportable compensation from the organization (W- 2/1099-	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization	
	organizations to below dotted line)	individual trustee or director	Institutional Trustee	10	key employee	Highest compensated employee	Former	MISC)	MISC)	organization and related organizations	
CAMALA KOVALICK  Director, Information and Project Management Servi	37 50		   		x	   		154,739	0	21,302	
BILLY WILLIAMS  Director, Science	37 50		   			х		191,540	0	45,836	
HARRY FURUKAWA  Director, Product Development	37 50					х		162,946	0	25,652	
Alexandra Shultz Director, Public Affairs	37 50					х		159,251	o	26,980	

37 50

37 50

37 50

37 50

. . . . . . . . . . . . . . . . . .

Michael S Andrews

Director, Human Resources

Former Key Director, Meetings

Former Key Director, Information Services

.....

Controller

Patricia Yaya

BRENDA WEAVER

KERRY MICKELSON

efile GRAPHIC p	rint - D	O NOT	PROCESS	As Filed	Data

hospital's name, city, and state

**170(b)(1)(A)(iv).** (Complete Part II )

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990EZ.

#### DLN: 93493320025826 OMB No 1545-0047

The organization is not a private foundation because it is (For lines 1 through 11, check only one box)

**Public Charity Status and Public Support** Complete if the organization is a section 501(c)(3) organization or a section

52-0955532

Employer identification number

Open to Public Inspection

Department of the Treasury Internal Revenue Service

990EZ)

Part I

1

2 3

SCHEDULE A

Name of the organization

AMERICAN GEOPHYSICAL UNION

(Form 990 or

4947(a)(1) nonexempt charitable trust. Attach to Form 990 or Form 990-EZ.

▶ Information about Schedule A (Form 990 or 990-EZ) and its instructions is at

www.irs.gov/form990.

**Reason for Public Charity Status** (All organizations must complete this part.) See instructions.

A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the

An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section

A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii).(Attach Schedule E (Form 990 or 990-EZ))

A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).

A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II) A community trust described in section 170(b)(1)(A)(vi) (Complete Part II) An organization that normally receives (1) more than 331/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 331/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 Seesection 509(a)(2). (Complete Part III) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box in lines 11a through 11d that describes the type of supporting organization and complete lines 11e, 11f, and 11g Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s) You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions) You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions) You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization Enter the number of supported organizations . . . . . . . . . . . . . . . . Provide the following information about the supported organization(s) (i) (ii)EIN (iii) (iv) (v) (vi) Name of supported organization Type of Is the organization A mount of A mount of other organization listed in your governing monetary support support (see (described on lines document? (see instructions) instructions) 1-9 above (see instructions)) Yes No Total

Cat No 11285F

Schedule A (Form 990 or 990-EZ) 2015

	edule A (Form 990 of 990-EZ) 2013						Page Z
Pā	Support Schedule fo						
	(Complete only if you of Part III. If the organization						
S	ection A. Public Support	acion falls to qu	iamy under the	tests listed bei	ow, piedse con	ipiete Fait III.	)
	Calendar year						1
(or	fiscal year beginning in)	(a)2011	<b>(b)</b> 2012	(c)2013	(d)2014	<b>(e)</b> 2015	<b>(f)</b> Total
•	Gifts, grants, contributions, and						
	membership fees received (Do						
	not include any unusual grants )						
2	Tax revenues levied for the						
	organization's benefit and either paid to or expended on its behalf						
3	The value of services or facilities						
•	furnished by a governmental unit						
	to the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included on line 1 that exceeds 2% of the						
	amount shown on line 11, column						
	(f)						
6	Public support. Subtract line 5						
	from line 4						
5	ection B. Total Support		Τ	Т	ı	T	
/or	Calendar year fiscal year beginning in) ▶	(a)2011	<b>(b)</b> 2012	(c)2013	(d)2014	<b>(e)</b> 2015	<b>(f)</b> ⊤otal
7	Amounts from line 4						
8	Gross income from interest,						
•	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources						
9	Net income from unrelated						
	business activities, whether or						
	not the business is regularly carried on						
10	Other income Do not include						
	gain or loss from the sale of						
	capital assets (Explain in Part						
	VI)						
L1	<b>Total support.</b> Add lines 7						
12	through 10 [ Gross receipts from related activiti	es etc (see inst	ructions)			12	
13	First five years.If the Form 990 is		•	thurd fourth or t	fifth tay year ac a		3) organization
	check this box and <b>stop here</b>	3	•		•	``	5) organización,
S	ection C. Computation of Pul	olic Support F	Percentage				
14	Public support percentage for 2015			11, column (f))		14	
15	Public support percentage for 2014	1 Schedule A , Pa	rt II, line 14			15	
L6a	<b>33 1/3% support test—2015.</b> If the	organization did	not check the box	on line 13, and l	line 14 is 33 1/3%		this box
	and <b>stop here.</b> The organization qua	-		•	•	•	▶□
b	<b>33 1/3% support test—2014.</b> If the				, and line 15 is 3	3 1/3% or more, o	heck this
	box and <b>stop here.</b> The organizatio						▶┌
L7a	10%-facts-and-circumstances test	_				•	
	is 10% or more, and if the organiza						
	in Part VI how the organization mee	eis the "facts-an	u-circumstances	test The organi	ızatıon qualifies a	s a publicly supp	- <del>-</del>
<b>L</b>	organization  10%-facts-and-circumstances test		anization did nat	shock a how on lin	0 12 16 3 16 4	or 17a and line	▶
U	15 is 10% or more, and if the organ						
	Explain in Part VI how the organiza				,	•	clv
	supported organization						▶ [
18	<b>Private foundation.</b> If the organizat	ion did not check	a box on line 13	, 16a, 16b, 17a, c	or 17b, check thi	s box and see	
	instructions				•		▶┌
							'

Gifts, grants, contributions, and

Section A. Public Support Calendar year

(or fiscal year beginning in) ▶

(f)Total

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(a)2011

(c)2013

(d)2014

(e)2015

(Complete only if	you checked th	ne box on line	e 9 of Part	I or if the orga	nization failed to	o qualify under	Par
II If the organiza	tion fails to dua	dify under the	a tacte liete	d halow nlass	e complete Dart	· TT \	

**(b)**2012

	membership fees received (Do not include any "unusual grants ")	2,731,674	3,520,077	4,093,488	4,195,143	2,513,039	17,053,421
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	29,802,674	31,549,011	12,992,652	27,547,038	27,516,431	129,407,806
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	<b>Total.</b> Add lines 1 through 5	32,534,348	35,069,088	17,086,140	31,742,181	30,029,470	146,461,227
7a	A mounts included on lines 1, 2, and 3 received from disqualified persons	14,582	20,678	3,890	57,475	18,270	114,895
b	A mounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						0
С	Add lines 7a and 7b	14,582	20,678	3,890	57,475	18,270	114,895
8	<b>Public support.</b> (Subtract line 7c from line 6)						146,346,332
Se	ection B. Total Support						
	Calendar year	(a)2011	<b>(b)</b> 2012	(c)2013	(d)2014	<b>(e)</b> 2015	<b>(f)</b> ⊤otal
(or 1	iscal year beginning in) ► A mounts from line 6	32,534,348	35,069,088	17,086,140	31,742,181	30,029,470	146,461,227
و LOa	Gross income from interest,	32,334,340	33,003,000	17,000,140	31,7 +2,101	30,023,470	140,401,227
	dividends, payments received on securities loans, rents, royalties and income from similar sources	2,850,163	13,163,737	15,781,394	2,513,179	2,046,350	36,354,823
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c	Add lines 10a and 10b	2,850,163	13,163,737	15,781,394	2,513,179	2,046,350	36,354,823
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)						
13	Total support. (Add lines 9,	35,384,511	48,232,825	32,867,534	34,255,360	32,075,820	182,816,050
14	10c, 11, and 12) First five years. If the Form 990 is	for the organizati	lon's first, second	l, third, fourth, or	l fifth tax year as a	section 501(c)(	3) organization,
	check this box and <b>stop here</b>				,		<u>▶</u>
Se	ction C. Computation of Pu	blic Support P	Percentage				
15	Public support percentage for 201	5 (line 8, column	(f) divided by line	e 13, column (f))		15	80 050 %
16	Public support percentage from 20	)14 Schedule A , F	Part III, line 15			16	80 790 %
Se	ction D. Computation of In			<del>-</del>			
17	Investment income percentage fo				nn (f))	17	19 890 %
18	Investment income percentage fro					18	19 100 %
19a	<b>33 1/3% support tests—2015.</b> If th	-		•			
h	more than 33 1/3%, check this bo						<b>▶ ✓</b>

18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

#### Part IV Supporting Organizations

(Complete only if you checked a box on line 11 of Part I If you checked 11a of Part I, complete Sections A and B If you checked 11b of Part I, complete Sections A, D, and E If you checked 11d of Part I, complete Sections A, D, and E If you checked 11d of Part I, complete Sections A, D, and D, and Complete Part V.)

	I, complete Sections A and D, and complete Part V )			
Se	ction A. All Supporting Organizations			
1	Are all of the organization's supported organizations listed by name in the organization's governing documents?  If "No," describe in <b>Part VI</b> how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain	1	Yes	No
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)?  If "Yes," explain in <b>Part VI</b> how the organization determined that the supported organization was described in section 509(a)(1) or (2)	2		
3а	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)?  If "Yes," answer (b) and (c) below	3a		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)?  If "Yes," describe in <b>Part VI</b> when and how the organization made the determination	3b		
C	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes?  If "Yes," explain in <b>Part VI</b> what controls the organization put in place to ensure such use	3с		
4a	Was any supported organization not organized in the United States ("foreign supported organization")?  If "Yes" and if you checked 11a or 11b in Part I, answer (b) and (c) below	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization?  If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations	4b		
c	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)?  If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year?  If "Yes," answer (b) and (c) below (if applicable) Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document)	5a		
b	<b>Type I or Type II only.</b> Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b		
c	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (a) its supported organizations, (b) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (c) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in <b>Part VI</b> .	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990)	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part II of Schedule L (Form 990)	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509 (a)(1) or (2))? If "Yes," provide detail in <b>Part VI</b> .	9a		
b	Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in <b>Part VI</b> .	9b		
c	Did a disqualified person (as defined in line 9(a)) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in <b>Part VI</b> .	9c		
.0a	Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer b below	10a		
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings)	<b>10</b> b		
.1	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		
c	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI	<b>11</b> c		

Part IV	Supporting	Organizations	(continued

I GIC IV		аррог	9	Oi guilleu	LIOIIS	(continue	ч,
Section	n R	Tyne	T Si	innorting	Orga	nization	_

			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in <b>Part VI</b> how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year	1		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization?  If "Yes," explain in <b>Part VI</b> how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting organization	2		

Section C. Type II Supporting Organization	Section	C.	Type	II	Supporting	Organization	s
--	---------	----	------	----	------------	--------------	---

			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or			
	trustees of each of the organization's supported organization(s)?			
	If "No," describe in <b>Part VI</b> how contiol or management of the supporting organization was vested in the same persons			
	that controlled or managed the supported organization(s)	1		

			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (1) a written notice describing the type and amount of support provided during the prior tax year, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization?  If "No," explain in <b>Part VI</b> how the organization maintained a close and continuous working relationship with the supported organization(s)	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year?  If "Yes." describe in <b>Part VI</b> the role the organization's supported organizations played in this regard	3		

#### Section E. Type III Functionally-Integrated Supporting Organizations

1	Check the box next to the method that the organization used to satis	fy the Integral Part Test during the year (see instructions)

- The organization satisfied the Activities Test Complete line 2 below
- The organization is the parent of each of its supported organizations. Complete line 3 below

С		i ne orga instructi	nization supported a governmental entity. Describe in Part VI now you supported a government entity (see ons)	эe
2	<u>A ctivit</u>	ies Test	_Answer (a) and (b) below.	Y
а			all of the organization's activities during the tax year directly further the exempt purposes of the	

	a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities				
	b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in?  If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement				
3	Parent of Supported Organizations Answer (a) and (b) below.				

- a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of 3a each of the supported organizations? Provide details in Part VI
- **b** Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard

3b

1 Check here if the organization satisfied the Integral Part Test as a qualifying Type III non-functionally integrated supporting organizations must complete.	_		ructions. All other
Section A - Adjusted Net Income		(A) Prior Year	(B) Current Yea (optional)
Net short-term capital gain	1		
Recoveries of prior-year distributions	2		
Other gross income (see instructions)	3		
Add lines 1 through 3	4		
Depreciation and depletion	5		
Portion of operating expenses paid or incurred for production or collection gross income or for management, conservation, or maintenance of proper held for production of income (see instructions)			
Other expenses (see instructions)	7		
Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Yea (optional)
Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year)	1		
<b>a</b> Average monthly value of securities	1a		
<b>b</b> Average monthly cash balances	1b		
<b>c</b> Fair market value of other non-exempt-use assets	<b>1</b> c		
d Total (add lines 1a, 1b, and 1c)	<b>1</b> d		
Discount claimed for blockage or other factors     (explain in detail in Part VI)	, _		
Acquisition indebtedness applicable to non-exempt use assets	2		
Subtract line 2 from line 1d	3		
Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see instructions)	4		
Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
Multiply line 5 by 035	6		
Recoveries of prior-year distributions	7		
Minimum Asset Amount (add line 7 to line 6)	8		
Section C - Distributable Amount			Current Year
Adjusted net income for prior year (from Section A, line 8, Column A)	1		
Enter 85% of line 1	2		
Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
Enter greater of line 2 or line 3	4		
Income tax imposed in prior year	5		
<b>Distributable A mount.</b> Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6		
Check here if the current year is the organization's first as a non-functional	ılly-ıntegrate	d Type III supporting	organization (see
instructions)			

Part V Type III Non-Functionally Integra	ated 509(a)(3) Suppo	rting Organizations (co	ontinuea)
Section D - Distributions			Current Year
1 Amounts paid to supported organizations to accom	plish exempt purposes		
2 Amounts paid to perform activity that directly furthe excess of income from activity			
3 Administrative expenses paid to accomplish exemp			
4 Amounts paid to acquire exempt-use assets			
5 Qualified set-aside amounts (prior IRS approval rec			
6 Other distributions (describe in Part VI) See instru	ıctions		
	200.0110		
7 Total annual distributions. Add lines 1 through 6			
8 Distributions to attentive supported organizations t details in Part VI) See instructions	to which the organization is r	esponsive (provide	
9 Distributable amount for 2015 from Section C, line	6		
10 Line 8 amount divided by Line 9 amount			
Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2015	(iii) Distributable Amount for 2015
1 Distributable amount for 2015 from Section C, line 6		110 2022	711110411111111111111111111111111111111
2 Underdistributions, if any, for years prior to 2015 (reasonable cause requiredsee instructions)			
<b>3</b> Excess distributions carryover, if any, to 2015			
a .			
b c			
d From 2013			
e From 2014			
f Total of lines 3a through e			
<b>g</b> Applied to underdistributions of prior years			
<b>h</b> Applied to 2015 distributable amount			
i Carryover from 2010 not applied (see instructions)			
j Remainder Subtract lines 3g, 3h, and 3i from 3f			
4 Distributions for 2015 from Section D, line 7  \$			
a Applied to underdistributions of prior years			
<b>b</b> Applied to 2015 distributable amount			
c Remainder Subtract lines 4a and 4b from 4			
5 Remaining underdistributions for years prior to 2015, if any Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions)			
6 Remaining underdistributions for 2015 Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions)			
<b>7 Excess distributions carryover to 2016.</b> Add lines 31 and 4c			
8 Breakdown of line 7			
a			
b			
c Excess from 2013			
<b>d</b> From 2014			
e From 2015			
		Calcadada A	(F 000 000 F7) (201 F

#### DLN: 93493320025826

### SCHEDULE C (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue

Service

## Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

▶Complete if the organization is described below. ▶Attach to Form 990 or Form 990-EZ.

▶Information about Schedule C (Form 990 or 990-EZ) and its instructions is at

www.irs.gov/form990.

2015
Open to Public Inspection

If the organization answered "Yes" on Form 990, Part IV, Line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C
- Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below Do not complete Part I-B
- Section 527 organizations Complete Part I-A only

If the organization answered "Yes" on Form 990, Part IV, Line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A Do not complete Part II-B
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete Part II-B

ıne	35c (Proxy Tax) (see separate		oxy Tax) (see se	parate instructions) or	Form 990-EZ, Part V,
Na	Section 501(c)(4), (5), or (6) orga ime of the organization ERICAN GEOPHYSICAL UNION	anizations Complete Part III			ntification number
0	t I-A Complete if the or	ganization is exempt under s	saction E01/s	52-0955532	
7 d l	•	<del>-</del>		-	organization.
1	Provide a description of the or	ganization's direct and indirect politic	al campaign activ	vities in Part IV	
2	Political expenditures			<b>&gt;</b>	\$
3	V olunteer hours				
Par	rt I-B Complete if the or	ganization is exempt under s	section 501(c	)(3).	
1		e tax incurred by the organization und		<b>&gt;</b>	\$
2	·	e tax incurred by organization manage		<b>4955 ▶</b>	\$
3	If the organization incurred a s	section 4955 tax, did it file Form 472	O for this year?		☐ Yes ☐ No
<b>4</b> a	Was a correction made?				☐ Yes ☐ No
b	If "Yes," describe in Part IV				1 105   110
		ganization is exempt under s	section 501(c	), except section 50	)1(c)(3).
1	Enter the amount directly expe	ended by the filing organization for sec	ction 527 exempt	t function activities 🕨	\$
2	Enter the amount of the filing of exempt function activities	organization's funds contributed to oth	ner organizations	for section 527	\$
3	Total exempt function expendi	tures Add lines 1 and 2 Enter here a	and on Form 1120	O-POL, line 17b ►	\$
4	Did the filing organization file <b>F</b>	orm 1120-POL for this year?			☐ Yes ☐ No
5	organization made payments l amount of political contribution	nd employer identification number (EI For each organization listed, enter the ns received that were promptly and di political action committee (PAC) If a	e amount paid fror rectly delivered t	n the filing organization's o a separate political org	funds Also enter the anization, such as a
	(a) Name	(b) Address	(c) EIN	(d) A mount paid from filing organization's funds If none, enter -0-	(e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-
2					
3					
4					
5					

Subtract line 1g from line 1a  $\,$  If zero or less, enter -0-

Grassroots lobbying expenditures

## Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).

		oying Expenditures means amounts paid or incurred.)	(a) Filing organization's totals	(b) Affiliated group totals
La	Total lobbying expenditures to influence public lobbying)	opinion (grass roots	901	
b	Total lobbying expenditures to influence a legi	slative body (direct lobbying)	43,978	
c	Total lobbying expenditures (add lines 1a and	1 b)	44,879	
d	Other exempt purpose expenditures		34,678,096	
e	Total exempt purpose expenditures (add lines	1c and 1d)	34,722,975	
f	Lobbying nontaxable amount Enter the amoun	t from the following table in both columns	1,000,000	
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:		
	Not over \$500,000	20% of the amount on line 1e		
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000		
	Over \$17,000,000	\$1,000,000		

i j	Subtract line 1f from line 1c If zero or less, enter- If there is an amount other than zero on either line reporting section 4911 tax for this year?		-	Form 4720 Y e s \( \bigcap \) No	0					
	4-Year Averaging Period Under section 501(h) (Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the separate instructions for lines 2a through 2f.)  Lobbying Expenditures During 4-Year Averaging Period									
	Calendar year (or fiscal year beginning in)	(a)2012	<b>(b)</b> 2013	(c)2014	<b>(d)</b> 2015	(e) Total				
2a	Lobbying nontaxable amount	1,000,000	1,000,000	1,000,000	1,000,000	4,000,000				
b	Lobbying ceiling amount (150% of line 2a, column(e))					6,000,000				
_с	Total lobbying expenditures	12,000	120,000	112,792	44,879	289,671				
d	Grassroots nontaxable amount	250,000	250,000	250,000	250,000	1,000,000				
e 	Grassroots ceiling amount (150% of line 2d, column (e))					1,500,000				

250,000

0

Return Reference

	edule C (Form 990 or 990-EZ) 2015				Pa	age <b>3</b>
Pa	rt II-B Complete if the organization is exempt under section 501(c)(3) and has filed Form 5768 (election under section 501(h)).	TO				
		(	a)		(b)	
ctiv	ach "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying ity		No		4 moun	it
_	During the year, did the filing organization attempt to influence foreign, national, state or local	Yes		7		
1	legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of					
а	Volunteers?					
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?					
c	Media advertisements?					
d	Mailings to members, legislators, or the public?					
е	Publications, or published or broadcast statements?					
f	Grants to other organizations for lobbying purposes?					
g	Direct contact with legislators, their staffs, government officials, or a legislative body?					
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?					
i	Other activities?					
j	Total Add lines 1c through 1i					
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?					
b	If "Yes," enter the amount of any tax incurred under section 4912					
c	If "Yes," enter the amount of any tax incurred by organization managers under section 4912					
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?					
Pai	t III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(6).	<b>01</b> (c	)(5),	or s	ectio	n
					Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?		[	1		
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2		
3	Did the organization agree to carry over lobbying and political expenditures from the prior year?			3		
Pai	t III-B Complete if the organization is exempt under section 501(c)(4), section 5501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "line 3, is answered "Yes."					
1	Dues, assessments and similar amounts from members	1				
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).					
а	Current year	2a				
b	Carryover from last year	2b				
C	Total	2c				
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3				
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4				
5	Taxable amount of lobbying and political expenditures (see instructions)	5				
	art IV Supplemental Information		I			
	• • • • • • • • • • • • • • • • • • • •		D	т А '		
	ovide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated grou see instructions), and Part II-B, line 1  Also, complete this part for any additional information	тр IIST), 	, Part I	1-A,I	ines 1	and

Explanation

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

**SCHEDULE D** 

## Supplemental Financial Statements

▶ Complete if the organization answered "Yes," on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

DLN: 93493320025826

Internal Revenue Se	r
Treasury	
Department of the	

(Form 990)

► Attach to Form 990.

Inspection **Employer identification number** Name of the organization AMERICAN GEOPHYSICAL UNION 52-0955532 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year Aggregate value of contributions to (during Aggregate value of grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7 Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Year Total number of conservation easements 2a Total acreage restricted by conservation easements 2b Number of conservation easements on a certified historic structure included in (a) Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶\_ Number of states where property subject to conservation easement is located ▶\_ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the A mount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year

the organization's accounting for conservation easements Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes

Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)

- If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items
  - If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items
  - (i) Revenue included on Form 990, Part VIII, line 1
  - (ii) Assets included in Form 990, Part X
- If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items
- Revenue included on Form 990, Part VIII, line 1

(B)(I) and section 170(h)(4)(B)(II)?

Assets included in Form 990, Part X

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

☐ No

**e** Other . .

Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c) ) .

Sche	aule i	D (Form 990) 2015											Page <b>2</b>
Part	••••	Organizations Maintaining (continued)	Collections of Art	, Hi	storic	al T	Γrea	sures, or (	Oth	er Simi	lar Ass	ets	
3		ng the organization's acquisition, acce ection items (check all that apply)	ssion, and other recor	ds,c	heck a	ny of	the	following that	are	a sıgnıfıc	ant use o	fits	
а	$\Gamma$	Public exhibition		d		Loa	n or	exchange pro	grar	ns			
b	г	Scholarly research		e	$\vdash$	Oth	er						
c	·	Preservation for future generations											
4	Prov	vide a description of the organization's	collections and expla	ın ho	wthev	furth	ner tl	ne organizatioi	n's e	exempt p	urpose in		
•		XIII			,					p.			
5	asse	ing the year, did the organization solic ets to be sold to raise funds rather tha	n to be maintained as							mılar	Yes	No	)
Par	t IV	Escrow and Custodial Arrai Complete if the organization a Part X, line 21.		orm	990, 1	Part	IV,	line 9, or re	por	ted an a	mount	on Fori	m 990,
<b>1</b> a		he organization an agent, trustee, cus uded on Form 990, Part X?	todian or other interme	ediary	/ for co	ntrıb	utio	ns or other ass	sets	not	☐ Yes	┌ No	o ·
b	If	f "Yes," explain the arrangement in Pa	rt XIII and complete t	he fo	llowing	tabl	e		Γ		A mou	nt	
c	В	eginning balance						10	: [				
d	Α	dditions during the year						1d					
e	D	istributions during the year						1e	:				
f		nding balance						1f					
2a	Did	the organization include an amount or	n Form 990, Part X, line	e 21,	for es	crow	or c	ustodial accou	ınt l	iability?	Yes	∏ No	•
b	If"Y	es," explain the arrangement in Part :	XIII Check here if the	expl	anatio	n has	s bee	en provided in	Par	t XIII .			
	rt V	Endowment Funds. Complet											
			(a)Current year	<b>(b)</b> P	nor year		b (c	<b>)</b> Two years back	(d)	<b>)</b> Three yea	rs back (	<b>e)</b> Four ye	ears back
1a	_	inning of year balance	602,625										
b	Con	ntributions	26,652		602	,625							
c	Net	investment earnings, gains, and	7,794										
d	Gra	nts or scholarships											
e		er expenditures for facilities programs											
f	A dn	ministrative expenses	6,000										
g	End	of year balance	631,071		602	,625							
2	Prov	ı Ide the estimated percentage of the o،	urrent year end baland	e (lir	ne 1g,	colur	mn (a	a)) held as			I		
а	Boai	rd designated or quasi-endowment <b>&gt;</b>	0 %										
b	Perr	nanent endowment ► 98 730 %											
c	Tem	porarily restricted endowment	1 270 %										
	The	percentages on lines 2a, 2b, and 2c s	should equal 100%										
3а		there endowment funds not in the pos anization by	session of the organiz	ation	that a	e he	ld ar	nd administere	d fo	r the		Yes	No
	(i) u	unrelated organizations									3a(i)	_	No
<b>L</b>		related organizations				do D	•	•			3a(ii	)	No
ь 4		res" on 3a(II), are the related organiza cribe in Part XIII the intended uses o					· ·				. 3b		<u> </u>
Par				401111	Terre rai	143							
		Complete if the organization a		rm 9			V, lı		For				
		Description of property		С	ost or ot ost or ot (invest	her b		(b) Cost or other ba (other)	ISIS	Accun (c)depre	nulated eciation	( <b>d)</b> Boo	ok value
<b>1</b> a	Land							1,705,0	21				1,705,021
b i	Buildi	ıngs						7,227,4	120	3	3,899,795		3,327,625
<b>c</b> l	Lease	ehold improvements						4,758,4	31	3	3,737,471		1,020,960

276,091

7,239,018

1,306,120

1,582,211

. . . . . .

See Form 990, Part X, line 12.  (a) Description of security or category  (including name of security)	ry	(b)Book value	(c)Method of valuation
(including name of security)  (1)Financial derivatives			Cost or end-of-year market va
2)Closely-held equity interests 3)Other			
A) TRUST INVESTMENTS		39,836,633	F
otal. (Column (b) must equal Form 990, Part X, col (B) line 12)	<b>•</b>	39,836,633	
art VIIII Investments—Program Related. Complete if the organization answere	ed 'Yes' on Form 990.	Part IV, line 11c.coo	Form 990 Part V June 13
(a) Description of investment	105 011 101111 330,	(b) Book value	(c) Method of valuation
			Cost or end-of-year market va
Total. (Column (b) must equal Form 990, Part X, col (B) line 13 )	tion answered 'Ves' on Fo	rm 990 Part IV line 11	d See Form 990 Part Y June 15
Part IX Other Assets. Complete if the organizat	tion answered 'Yes' on Fo	rm 990, Part IV, line 11	d See Form 990, Part X, line 15 (b) Book value
Part IX Other Assets. Complete if the organizat		rm 990, Part IV, line 11	
Part IX Other Assets. Complete if the organizat		rm 990, Part IV, line 11	
Part IX Other Assets. Complete if the organizat		rm 990, Part IV, line 11	
Part IX Other Assets. Complete if the organizat		rm 990, Part IV, line 11	
Part IX Other Assets. Complete if the organizat		rm 990, Part IV, line 11	
Part IX Other Assets. Complete if the organizat		rm 990, Part IV, line 11	
Part IX Other Assets. Complete if the organizat		rm 990, Part IV, line 11	
Part IX Other Assets. Complete if the organizat		rm 990, Part IV, line 11	
Part IX Other Assets. Complete if the organizat		rm 990, Part IV, line 11	
Other Assets. Complete if the organizat  (a) Des	cription	rm 990, Part IV, line 11	
Other Assets. Complete if the organizate (a) Des  (a) Des  otal. (Column (b) must equal Form 990, Part X, col (B) line  Part X Other Liabilities. Complete if the organizate (a) Des	e 15 )		(b) Book value
Other Assets. Complete if the organizat  (a) Des  otal. (Column (b) must equal Form 990, Part X, col (B) line  Part X Other Liabilities. Complete if the or  See Form 990, Part X, line 25.	e 15 )		(b) Book value
Other Assets. Complete if the organizat  (a) Des  otal. (Column (b) must equal Form 990, Part X, col (B) line  Part X Other Liabilities. Complete if the or  See Form 990, Part X, line 25.  (a) Description of liability	e 15 )		(b) Book value
otal. (Column (b) must equal Form 990, Part X, col (B) line  Part X Other Liabilities. Complete if the or See Form 990, Part X, line 25.  (a) Description of liability  ederal income taxes	e 15 )		(b) Book value
Other Assets. Complete if the organizat  (a) Des  Otal. (Column (b) must equal Form 990, Part X, col (B) line  Part X Other Liabilities. Complete if the or See Form 990, Part X, line 25.  (a) Description of liability  ederal income taxes  ECURITY DEPOSITS	e 15 )		(b) Book value
Other Assets. Complete if the organizat  (a) Des  otal. (Column (b) must equal Form 990, Part X, col (B) line  Part X Other Liabilities. Complete if the or See Form 990, Part X, line 25.  (a) Description of liability  ederal income taxes  ECURITY DEPOSITS	e 15 )		(b) Book value
Other Assets. Complete if the organizat  (a) Des  otal. (Column (b) must equal Form 990, Part X, col (B) line  Part X Other Liabilities. Complete if the or  See Form 990, Part X, line 25.  (a) Description of liability  ederal income taxes  ECURITY DEPOSITS  NTEREST RATE COLLAR AGREEMENTS	e 15 )		(b) Book value
Other Assets. Complete if the organizat  (a) Des  Otal. (Column (b) must equal Form 990, Part X, col (B) line  Part X Other Liabilities. Complete if the or See Form 990, Part X, line 25.  (a) Description of liability  ederal income taxes  ECURITY DEPOSITS  NTEREST RATE COLLAR AGREEMENTS  CCRUED POSTRETIREMENT BENEFITS	e 15 )		(b) Book value
Other Assets. Complete if the organizat  (a) Des  Otal. (Column (b) must equal Form 990, Part X, col (B) line  Part X Other Liabilities. Complete if the or See Form 990, Part X, line 25.  (a) Description of liability  ederal income taxes  ECURITY DEPOSITS  NTEREST RATE COLLAR AGREEMENTS  CCRUED POSTRETIREMENT BENEFITS	(b) Book value  7,07  486,29		(b) Book value
COCRUED POSTRETIREMENT BENEFITS  (a) Description of the organizate (a) Description of Descriptio	(b) Book value  7,07  486,29		(b) Book value
Part IX Other Assets. Complete if the organizat  (a) Des  Total. (Column (b) must equal Form 990, Part X, col (B) line  Part X Other Liabilities. Complete if the or See Form 990, Part X, line 25.  (a) Description of liability  Tederal income taxes  SECURITY DEPOSITS  NTEREST RATE COLLAR AGREEMENTS	(b) Book value  7,07  486,29		(b) Book value
Total. (Column (b) must equal Form 990, Part X, col (B) line  Part X  Other Assets. Complete if the organizate  (a) Des  (a) Des  (b) Des  (c) Des  (c) Des  (d) Des  (e) Des	(b) Book value  7,07  486,29		(b) Book value
Total. (Column (b) must equal Form 990, Part X, col (B) line  Part X Other Liabilities. Complete if the or See Form 990, Part X, line 25.  I. (a) Description of liability  Gederal income taxes  SECURITY DEPOSITS  NTEREST RATE COLLAR AGREEMENTS  ACCRUED POSTRETIREMENT BENEFITS	(b) Book value  7,07  486,29		(b) Book value

Total revenue, gains, and other support per audited financial statements .

Amounts included on line 1 but not on Form 990, Part VIII, line 12

Amounts included on Form 990, Part VIII, line 12, but not on line 1

Net unrealized gains (losses) on investments .

**Supplemental Information** 

Donated services and use of facilities .

Recoveries of prior year grants .

Other (Describe in Part XIII)

Add lines 2a through 2d .

Subtract line 2e from line 1

1

2

3

Part XIII

information

Part V, Line 4

Return Reference

а

30,077,850

-4,032,716

34,110,566

Investment expenses not included on Form 990, Part VIII, line 7b . 4a		
Other (Describe in Part XIII)		
Add lines <b>4a</b> and <b>4b</b>	4c	
Total revenue Add lines <b>3</b> and <b>4c.</b> (This must equal Form 990, Part I, line 12)	5	34,110,56
Reconciliation of Expenses per Audited Financial Statements With Expense Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.	s per Re	turn.
Total expenses and losses per audited financial statements	1	35,618,25
Amounts included on line 1 but not on Form 990, Part IX, line 25		
Donated services and use of facilities		
Prior year adjustments	1	
Other losses		
Other (Describe in Part XIII )	1	
	2e	
Subtract line <b>2e</b> from line <b>1</b>	3	35,618,25
Amounts included on Form 990, Part IX, line 25, but not on line 1:		
Investment expenses not included on Form 990, Part VIII, line 7b 4a		
Other (Describe in Part XIII )	1	
Add lines <b>4a</b> and <b>4b</b>	4c	
Total expenses Add lines <b>3</b> and <b>4c.</b> (This must equal Form 990, Part I, line 18)	5	35,618,25
	Add lines 4a and 4b	Other (Describe in Part XIII )

Part V, line 4, Part X, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any additional

Explanation

The endowment funds have been established for the purpose of recognizing and supporting excellence

Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b,

in specific areas of scientific research

2a

2b

2c

2d

-5,984,800

1,952,084

2e

3

Schedule D (Form 990) 2015	Page <b>5</b>					
Part XIII Supplemental Information (continued)						
Return Reference	Explanation					
		_				

efile GRAPHIC print - DO No	OT PROCESS	As Filed Dat	ta -	DLN:	93493320025826
SCHEDULE F St (Form 990)	atement of	Activities C	Outside the Unit	ed States	OMB No 1545-0047
Nenartment of the Treasury	·	Part IV, line 1 ► Attach to	n answered "Yes" to Form 14b, 15, or 16. o Form 990. nd its instructions is at wi		2015 Open to Public Inspection
Name of the organization AMERICAN GEOPHYSICAL UNIO	N			<b>Employer iden</b> 52-0955532	tification number
Part I General Informat Complete if the order			ne United States. orm 990, Part IV, line	14b.	
<ol> <li>For grantmakers. Does the and other assistance, the used to award the grants of the grants of the grantmakers. Describe assistance outside the United the United States of the United Sta</li></ol>	grantees' eligibil or assistance? e in Part V the oi	lity for the grar	its or assistance, and	the selection criteria	<b>√ Yes  No</b> nts and other
3 Activites per Region (The following	lowing Part I, line	3 table can be du	uplicated if additional spa	ice is needed )	
(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e g , fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is program service, describe specific type of service(s) in region	a <b>(f)</b> Total expenditures for and investments in region
(1) See Add'l Data			,		
( 2)					
(3)					
(4)					
(5)					
3a Sub-total b Total from continuation sheet to Part I	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	0			833,592 3,200,910
c Totals (add lines 3a and 3b) For Paperwork Reduction Act Notice, s	osee the Instructions			No 50082W <b>Sche</b> e	4,034,502 dule F (Form 990) 2015

Schedule F (Form 990) 2015

organization	and EIN (if applicable)	grant 	cash grant	disbursement	assistance	assistance	(book, FMV, appraisal, other)
(1)							
( 2)							
( 3)							
(4)							

Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as

tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter . . . . . 

Schedule F (Form 990) 2015

Page 2

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16. Part III can be duplicated if additional space is needed.								
(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) A mount of cash grant	(e) Manner of cash disbursement	(f) A mount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)	
(1) Fall Meeting Grant	North America	8	6,500	WIRE TRANSFER				

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) A mount of cash grant	(e) Manner of cash disbursement	(f) A mount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
(1) Fall Meeting Grant	North America	8	6,500	WIRE TRANSFER			
( 2) Fall Meeting Grant	East Asia and the Pacific	21	19,311	WIRE TRANSFER			
(3) Chapman Travel Grant	Europe (Including Iceland & Greenland)	1	3,209	WIRE TRANSFER			
(4) Fall Meeting Grant	Europe (Including Iceland & Greenland)	38	38,489	WIRE TRANSFER			
(5) Fall Meeting Grant	Middle East and North	6	5,732	WIRE TRANSFER			

(2) Fall Meeting Grant	East Asia and the Pacific	21	19,311	WIRE TRANSFER		
( 3) Chapman Travel Grant	Europe (Including Iceland & Greenland)	1	3,209	WIRE TRANSFER		
(4) Fall Meeting Grant	Europe (Including Iceland & Greenland)	38	38,489	WIRE TRANSFER		
(5) Fall Meeting Grant	Middle East and North Africa	6	5,732	WIRE TRANSFER		
(6) Fall Meeting Grant	Russia and Neighboring States	4	3,343	WIRE TRANSFER		
(7) Fall Meeting Grant	South America	10	10,000	WIRE TRANSFER		
(8) Chapman Travel Grant	South Asia	3	7,545	WIRE TRANSFER		
(9) Fall Meeting Grant	South Asia	19	10,860	WIRE TRANSFER		
(10) Fall Meeting Grant	Sub-Saharan Africa	8	6,173	WIRE TRANSFER		
(11)						

(4) Fall Meeting Grant	Europe (Including Iceland & Greenland)	38	38,489	WIRE TRANSFER		
(5) Fall Meeting Grant	Middle East and North Africa	6	5,732	WIRE TRANSFER		
( 6) Fall Meeting Grant	Russia and Neighboring States	4	3,343	WIRE TRANSFER		
(7) Fall Meeting Grant	South America	10	10,000	WIRE TRANSFER		
(8) Chapman Travel Grant	South Asia	3	7,545	WIRE TRANSFER		
(9) Fall Meeting Grant	South Asia	19	10,860	WIRE TRANSFER		
( 10) Fall Meeting Grant	Sub-Saharan Africa	8	6,173	WIRE TRANSFER		
(11)						
( 12)						
(13)						
(14)						
( 15)						
(16)						
(17)						

(8) Chapman Travel Grant	South Asia	3	7,545	WIRE TRANSFER		
(9) Fall Meeting Grant	South Asia	19	10,860	WIRE TRANSFER		
( 10) Fall Meeting Grant	Sub-Saharan Africa	8	6,173	WIRE TRANSFER		
(11)						
( 12)						
( 13)						
( 14)						
( 15)						
( 16)						
( 17)						
( 18)						

8621)

5 Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with Respect to Certain Foreign Partnerships (see Instructions for Form 8865)

✓ No

Did the organization have any operations in or related to any boycotting countries during the tax year? If
"Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form
5713, do not file with Form 990)

✓ Yes ✓ No

method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information (see instructions).

### 990 Schedule F. Supplemental Information

Schedule F (Form 990) 2015

Return Reference	Explanation
Part I, Line 2	PRIOR TO MAKING AN AWARD TO A FOREIGN NATIONAL, AGU AND START CHECKS THE EXCLUDED PARTIES LIST SYSTEM (HTTPS //WWW EPLS GOV/) TO ENSURE THAT THE RECIPIENT IS ALLOWED TO RECEIVE THE SE FUNDS

## **Additional Data**

(a) Region

Software ID: Software Version:

**EIN:** 52-0955532

(d) Activities

Name: AMERICAN GEOPHYSICAL UNION

(f) Total expenditures

Form 990 Schedule F Part I - Activities Outside The United States

(b) Number of (c) Number of

(a) Region	offices in the region	employees or agents in region	conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(d) is a program service, describe specific type of service(s) in region	for region
Central America and the Caribbean - Antigua & Barbuda, Aruba, Bahamas,	0	0	program service activities	Reimbursements	236
East Asia and the Pacific - Australia, Brunei, Burma, Cambodia,	0	0	program service activities	Honoraria, Reimbursements	139,687
Europe (Including Iceland & Greenland) - Albania, Andorra, Austria, Belgium	0	0	program service activities	Honoraria, Reimbursements	393,487

(a) Region (c) Number of (f) Total expenditures (b) Number of (d) Activities (e) If activity listed in offices in the emplovees or conducted in region (by (d) is a program service, for region type) (i.e., fundraising, describe specific type of agents in region service(s) in region region program services. grants to recipients located in the region) Middle Fast and North IGRANTMAKING 6,232 Africa - Algeria, Bahrain, Djibouti, Egypt, North America - Canada Iprogram service Honoraria, 247,547 and Mexico, but not the lactivities Reimbursements United States Russia and Neighboring IGRANTMAKING 4,343

Form 990 Schedule F Part I - Activities Outside The United States

States - Armenia, Azerbijan,

Belarus,

offices in the region agents in region (by type) (i.e., fundraising, program service) (d) is a program service, describe specific type of service(s) in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)

South America - Argentina, 0 program service Reimbursements 11,403

IGRANTMAKING

(d) Activities

(e) If activity listed in

(f) Total expenditures

6.173

South America - Argentina, Bolivia, Brazil, Chile, Columbia, Ecuador,	0	program service activities	Reimbursements	11,403
South Asia - Afghanistan, Bangladesh, Bhutan, India,	0	program service activities	Reimbursements	30,657

Form 990 Schedule F Part I - Activities Outside The United States

(c) Number of

(b) Number of

(a) Region

Maldives, Nepal,

Burkina Faso.

Sub-Saharan Africa -

Angola, Benin, Botswana,

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (e) If activity listed in (d) Activities (f) Total expenditures offices in the employees or conducted in region (by (d) is a program for region type) (i.e., fundraising, agents in service, describe region specific type of service region program services. grants to recipients (s) in region located in the region) Europe (Including Iceland & 3,194,737 linvestments Greenland) - Albania,

Andorra, Austria, Belgium

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Name of the organization

AMERICAN GEOPHYSICAL UNION

**Grants and Other Assistance to Organizations,** Governments and Individuals in the United States

Complete if the organization answered "Yes," on Form 990, Part IV, line 21 or 22.

► Attach to Form 990. ▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990. OMB No 1545-0047

Employer identification number

2015

DLN: 93493320025826

Open to Public Inspection

						52-0955532	
Part I General Information	n on Grants an	d Assistance					
<ol> <li>Does the organization maintain the selection criteria used to av</li> <li>Describe in Part IV the organization</li> </ol>	vard the grants or a	ssistance?				stance, and	√ Yes No
Part II Grants and Other Assistation that received more than s				plete if the organization	answered "Yes" on F	Form 990, Part IV, line 21	, for any recipient
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
See Additional Data Table							
2 Enter total number of section 50	01(c)(3) and gover	nment organizations lis	sted in the line 1 table .				3
<b>3</b> Enter total number of other orga	nızatıons listed in i	the line 1 table	<u> </u>	· · · · · ·		•	0
For Paperwork Reduction Act Notice, see	the Instructions for	Form 990.		Cat No 50055P		Schedu	le I (Form 990) 2015

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22 Part III can be duplicated if additional space is needed

(a)Type of grant or assistance	(b)Number of recipients	(c)A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
(1) Chapman Travel Grant	12	7,559			
(2) Congressional Science Fellow	4	164,497			
(3) 2015 Fall Meeting Travel Grants	93	82,956			
(4) 2015 Joint Assembly Travel Grants	8	3,000			
(5) 2015 Other Travel Grants	1	1,959			
(6) 2015 Horton Grant	5	26,500			
Part TV Supplemental Information Provide the information required in Part I. line 2. Part III. column (b), and any other additional information					

Part IV	Supplemental Informat	tion. Provide the infor	rmation required in Pa	art I. line 2. Part III.	column (b), and any other	additional information.

(5) 2015 Other Travel Grants		1	1,959			
(6) 2015 Horton Grant		5	26,500			
Part IV Supplemental	Informat	ion. Provide the infor	rmation required in Pa	art I, line 2, Part III,	column (b), and any other	additional information.
Return Reference	Explanati	on				
Part I, Line 2	CONTRAC BUDGET I NOT LIST PARTIES FINANCIA SIGNATU INFORMA	CT POTENTIAL AWARD NARRATIVE EXPLAININ ED ON EITHER THE TR LIST SYSTEM THE PRI AL REGULATIONS, AS N RE IT IS EXPECTED TH TION, ESPECIALLY IN	EES ARE ASKED TO RE NG PROPOSED EXPENS EASURY DEPARTMENT NCIPAL INVESTIGATO WELL AS REFERENCES N AT THEY WILL ABIDE E REGARD TO REPORTIN	EVISE THEIR BUDGETS ES PRIOR TO TRANSF OFFICE OF TERRORIS OR AND THE INSTITUT WITH ADDITIONAL INI BY ALL STIPULATIONS NG REQUIREMENTS TH	S, WHERE NECESSARY, AND TERRING ANY FUNDS, WE CO SM AND FINANCIAL SANCTI- ION'S FINANCIAL OFFICER FORMATION THE AWARDEE OF THE CONTRACT AS WEL HE NAME OF THE CONTRACT	O AND THE PRESENTATION OF A TO PRESENT AN ANNOTATED NFIRM THAT THE RECIPIENT IS ONS LIST OR THE GSA EXCLUDED ARE PRESENTED WITH COPIES OF S ARE INSTRUCTED THAT UPON LLAS THE ACCOMPANYING TOFFICER IS INCLUDED IN ALL FFICER THROUGHOUT THE TIME OF

THE GRANT AWARD AWARDEES ARE ALSO REQUIRED TO REPORT ON CHANGES IN PROPOSED EXPENSES IF THOSE CHANGES EXCEED

20% OF THE FUNDS IN ANY INDIVIDUAL CATEGORY, DETAILED FINANCIAL REPORTS, INCLUDING BACKUP DOCUMENTATION, ARE REQUIRED AT SUITABLE INTERVALS DURING THE PROJECTS. THE GRANT AWARDS ARE MADE IN INSTALLMENTS BASED ON A PRE-DETERMINED PAYMENT SCHEDULE FINAL PAYMENTS ARE MADE ONLY AFTER REVIEW OF THE FINANCIAL STATEMENTS AND TECHNICAL REPORTS AND ARE BASED ON ACTUAL EXPENSES AND CONFIRMATION THAT THE AWARDEE HAS MET CONTRACT OBLIGATIONS

## **Additional Data**

Software ID: Software Version:

**EIN:** 52-0955532

Name: AMERICAN GEOPHYSICAL UNION

Form 990,Schedule I, Par	form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.							
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance	
START INTERNATIONAL 2000 FLORIDA AVE NW 2ND FLOOR WASHINGTON, DC 20009	27-1363108	501(C)(3)	115,685				SUBGRANT FOR FEDERALAWARDS	
AMERICAN ASSOCIATION FOR THE ADVANCEMENT OF SCIENCE 1200 NEW YORK AVE NW WASHINGTON, DC 20005	53-0196568	501(C)(3)	7,530				Congressional Science Fellows	
American Astronomical Society 2000 FLORIDA AVE NW 3RD FLOOR WASHINGTON DC 20009	21-0735173	501(C)(3)	10,000				TESS event support	

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Schedule J (Form 990)

Department of the

Treasury

DLN: 93493320025826

OMB No 1545-0047

2015

# Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest

**Compensated Employees** ▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

► Attach to Form 990.

▶ Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

	al Revenue Service						
	me of the organization RICAN GEOPHYSICAL UNION		Employer identification	on nur	nber		
7 11 12	52-0955532						
Pa	rt I Questions Regarding Compensation						
					Yes	No	
<b>1</b> a	Check the appropriate box(es) if the organization provided a 990, Part VII, Section A, line 1a Complete Part III to prov						
	First-class or charter travel	Housing allowance or residence fo	r personal use			İ	
	▼ Travel for companions	. Payments for business use of pers	onal residence				
	Tax idemnification and gross-up payments	Health or social club dues or initia	tion fees				
	Discretionary spending account	Personal services (e g , maid, cha	uffeur, chef)				
b 2	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain						
	directors, trustees, officers, including the CEO/Executive D	Thector, regarding the items enecked	in mic 1a.	2	Yes		
3	Indicate which, if any, of the following the filing organization organization's CEO/Executive Director Check all that applused by a related organization to establish compensation or	y Do not check any boxes for metho	ds				
	✓ Compensation committee ✓ Written employment contract						
	✓ Independent compensation consultant ✓ Compensation survey or study						
	Form 990 of other organizations	Approval by the board or compens	ation committee			!	
4	During the year, did any person listed on Form 990, Part VI or a related organization	${ m II}$ , ${ m Section}$ ${ m A}$ , ${ m line}$ ${ m 1a}$ with ${ m respect}$ ${ m to}$	the filing organization				
а	Receive a severance payment or change-of-control paymer	nt?		4a	Yes		
b	Participate in, or receive payment from, a supplemental nor	nqualified retirement plan?		4b	Yes		
c	Participate in, or receive payment from, an equity-based co	mpensation arrangement?		4c		Νo	
	If "Yes" to any of lines 4a-c, list the persons and provide the	ne applicable amounts for each item	ın Part III				
5	Only 501(c)(3), 501(c)(4), and 501(c)(29) organizations m For persons listed on Form 990, Part VII, Section A, line 1 compensation contingent on the revenues of	•	any				
а	The organization?			5a		Νo	
b	Any related organization?			5b		Νo	
	If "Yes," on line 5a or 5b, describe in Part III						
6	For persons listed on Form 990, Part VII, Section A, line 1 compensation contingent on the net earnings of	a, did the organization pay or accrue	any				
а	The organization?			<b>6</b> a		Νo	
b	Any related organization?			6b		Νo	
	If "Yes," on line 6a or 6b, describe in Part III						
7	For persons listed on Form 990, Part VII, Section A, line 1 payments not described in lines 5 and 67 If "Yes," described to the section of t		on-fixed	7	Yes		
8	Were any amounts reported on Form 990, Part VII, paid or subject to the initial contract exception described in Regula in Part III	•		8		No	
9	If "Yes" on line 8, did the organization also follow the rebut section 53 4958-6(c)?	table presumption procedure describ	ed in Regulations	9			

Selledales (Form 550) 2015					r age 🕳			
Part III Officers, Directors,	Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.							
ınstructions, on row (II) Do not list ar	tion must be reported on Schedule J, report compensation from the ony individuals that are not listed on Form 990, Part VII for each listed individual must equal the total amount of Form 990, F	.,	-	·				
(A) Name and Title	(B) Breakdown of W-2 and/or 1099-MISC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation in			

Schedule J (Form 990) 2015

(A) Name and Title	(B) Breakdown o	f W-2 and/or 1099-MIS	SC compensation	(C) Retirement and	( <b>D)</b> Nontaxable	(E) Total of columns	(F) Compensation in
	B	(ii)	(ıiı)	other deferred	benefits	(B)(ı)-(D)	column(B) reported
	Base (1) compensation	Bonus & incentive	Other reportable	compensation			as deferred on prior
	(1) compensation	compensation	compensation				Form 990

Schedule 1 (Form 990) 2015

See Additional Data Table

` ,	T mg = -
Part IIII Supplemental In	formation
Provide the information, explanation	n, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II Also complete this part for any additional information
Return Reference	Explanation
Part I, Line 1a	AGU MAY PROVIDE BUSINESS OR FIRST CLASS TRAVEL (ON A CASE-BY-CASE BASIS) FOR THE AGU PRESIDENT WHEN MULTIPLE TRIPS (IN EXCESS OF 6 HOURS) TO ATTEND AGU BUSINESS MEETINGS ARE REQUIRED ADDITIONALLY, THE CEO'S EMPLOYMENT AGREEMENT ALLOWS FOR BUSINESS OR FIRST CLASS TRAVEL FOR TRIPS IN EXCESS OF 5 HOURS AGU DOES NOT INCLUDE THE COST OF FIRST CLASS OR BUSINESS TRAVEL AS TAXABLE INCOME TO THE CEO OR PRESIDENT AGU WILL PAY ANNUALLY ALL REASONABLE EXPENSES OF THE CEO'S SPOUSE TO ACCOMPANY HER TO THE FALL MEETING AND ONE OTHER AGU MEETING OF HER CHOICE

Schedule J (Form 990) 2015

Part I. Lines 4a-b CHRISTINE W MCENTEE \$68,482, SECTION 457 PLAN Frank Krause \$12,415, Section 457 plan kerry mickelson \$66,951, Severance pay brenda weaver \$114,880, Severance pay Part I, Line 7

Schedule J (Form 990) 2015

THE EXECUTIVE COMMITTEE, IN ITS SOLE DISCRETION, MAY PAY EXECUTIVE AN ANNUAL PERFORMANCE BONUS OF UP TO TEN PERCENT

|(10%) OF HER SALARY BASED ON HER ACHIEVING EXPLICIT PERFORMANCE GOALS MANUALLY SET FORTH ANNUALLY BY THE EXECUTIVE AND THE EXECUTIVE COMMITTEE DURING THE REVIEW PERIOD

# Software ID: Software Version:

**EIN:** 52-0955532

Name: AMERICAN GEOPHYSICAL UNION

Form 990, Schedule J,	Part	II - Officers, Direc	tors, Trustees, K	ey Employees, and	l Highest Compen	sated Employees		
(A) Name and Title		(i) Base	f W-2 and/or 1099-MI: (ii) Bonus &	(iii) Other	(C) Retirement and other deferred compensation	<b>(D)</b> Nontaxable benefits	(E) Total of columns (B)(I)-(D)	(F) Compensation in column (B) reported as deferred
		Compensation	incentive compensation	reportable compensation				on prior Form 990
1CHRISTINE W MCENTEE Chief Executive Officer	(1)	445,635	44,125	21,564	100,683	24,436	636,443	0
	(11)	0	0	0	0	0	o	О
1FRANK KRAUSE Chief Operating Officer	(1)	326,699	16,215	810	44,616	26,450	414,790	0
	(11)	0	0	0	0	-	- 0	0
2MARK HERNICK Chief Financial Officer	(1)	227,203	0	1,140	27,230	10,521	266,094	0
	(11)	0	0	0	0	- - 0	-	0
3Royce B Hanson Director, Publications	(1)	232,121	5,110	2,183	28,712	13,826	281,952	0
	(11)	0	0	0	0	-		0
4Dana RehmDirector, MCE	(1)	208,469	10,552	20,108	28,443	1,652	269,224	0
	(11)	0	0	0	0			0
5CAMALA KOVALICK Director, Information and	(1)	142,784	11,538	417	15,873	6,592	177,204	0
Project Ma	(11)	0	0	0	0			0
<b>6</b> BILLY WILLIAMS Director, Science	(1)	186,150	0	5,390	22,852	24,482	238,874	0
·	(11)	0	0	0	0			0
7HARRY FURUKAWA Director, Product	(1)	160,691	0	2,255	17,796	9,162	189,904	0
Development	(11)	0	0	0	0			0
<b>8</b> Alexandra Shultz Director, Public Affairs	(1)	158,756	0	495	17,118	11,215	187,584	0
	(11)	0	0	0	0			0
9Michael S AndrewsController	(1)	151,491	1,544	3,276	16,104	1,822	174,237	0
	(11)	o	0	0	0			0
10Patricia Yaya Director, Human Resources	(1)	144,088	1,623	676	15,167	3,420	164,974	0
	(11)	0	0	0	0			0
11BRENDA WEAVER Former Key Director,	(1)	58,828	0	131,410	5,170	3,464	198,872	0
Meetings	(11)	0	0	0	0	-		0
12KERRY MICKELSON Former Key Director,	(1)	25,531	0	75,028	2,260	2,166	104,985	0
Information Se	(11)	0	0	0	0	-	-	0
		l				0	1 0	

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Supplemental Information on Tax Exempt Bonds

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information in Part VI. ▶ Attach to Form 990.

2015 Open to Public

DLN: 93493320025826 OMB No 1545-0047

Inspection

Internal Revenue Service

Department of the Treasury

(Form 990)

▶Information about Schedule K (Form 990) and its instructions is at www.irs.gov/form990.

Name of the organization Employer identification number AMERICAN GEOPHYSICAL UNION 52-0955532 Part I **Bond Issues** (a) Issuer name (b) Issuer EIN (c) CUSIP # (d) Date issued (e) Issue price (f) Description of purpose (g) Defeased (h) On (i) Pool behalf of financing ıssuer Yes No Yes No Yes No DISTRICT OF COLUMBIA 53-6001131 254839K77 05-10-2006 8,095,000 REMARKET 09/29/93 BOND Х Х Х ISSUE Part II **Proceeds** Α С 3.590.000 A mount of bonds legally defeased . . . . . . . . . . . . . . . . . 2 Total proceeds of issue 8.095.000 . . . . . . . . . . . . . . . . . . . Gross proceeds in reserve funds . . . . . . . . . . . . . . 616,312 5 8 9 10 11 12 13 1994 Yes No Yes No Yes Yes No Were the bonds issued as part of a current refunding issue? . . . . Χ 14 Were the bonds issued as part of an advance refunding issue? . . . . Х 15 Χ 16 Does the organization maintain adequate books and records to support the final 17 Χ allocation of proceeds? . . . . . . . . . . . . . . . . . Private Business Use Α В С D Yes No Yes No Yes No Yes No

Was the organization a partner in a partnership, or a member of an LLC, which owned

Are there any lease arrangements that may result in private business use of bondХ

Х

			A		В		L	1	U
		Yes	No	Yes	No	Yes	No	Yes	No
3a	Are there any management or service contracts that may result in private business to food-financed property?	ıse	X						
	If "Yes" to line 3a, does the organization routinely engage bond counsel or other outs	side							
	counsel to review any management or service contracts relating to the financed								
prope <b>c</b>	Are there any research agreements that may result in private business use of bond-								
	financed property?		×						
d	If "Yes" to line 3c, does the organization routinely engage bond counsel or other outs counsel to review any research agreements relating to the financed property?	side							
4	Enter the percentage of financed property used in a private business use by entities other than a section $501(c)(3)$ organization or a state or local government								
5	Enter the percentage of financed property used in a private business use as a result unrelated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government								
6	Total of lines 4 and 5								
7	Does the bond issue meet the private security or payment test?		Х						
8a	Has there been a sale or disposition of any of the bond-financed property to a nongovernmental person other than a 501(c)(3) organization since the bonds were issued?		×						
b	If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of	of	•				•		•
С	If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections 1 141-12 and 1 145-2?								
9	Has the organization established written procedures to ensure that all nonqualified bonds of the issue are remediated in accordance with the requirements under Regulations sections 1 141-12 and 1 145-2?	×							
Par	Arbitrage		•			Į.	•		
		A		В		С		D	
	Yes	No	Yes	No	Ye	es	No	Yes	No
1	Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate?	X							
2	If "No" to line 1, did the following apply?	•		•				•	
a	Rebate not due yet?	Х							
b	Exception to rebate?	Х							
С	No rebate due? χ								
	If "Yes" to line 2c, provide in Part VI the date the rebate computation was performed								
3	Is the bond issue a variable rate issue?	Х							
4a	Has the organization or the governmental issuer entered into a qualified hedge with respect to the bond issue?	X							
b	Name of provider								
С	Term of hedge								
d	Was the hedge superintegrated?								
e	Was the hedge terminated?								

С	Term of GIC				
d	Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?				
6	Were any gross proceeds invested beyond an available temporary period?	х			
7	Has the organization established written procedures to monitor				

the requirements of section 148? . . . Part V Procedures To Undertake Corrective Action

		Α		В		С		D	
		Yes	No	Yes	No	Yes	No	Yes	No
that violations of federal and corrected through th	ablished written procedures to ensure tax requirements are timely identified e voluntary closing agreement program if vailable under applicable regulations?	×							
Part VI Supplemental Information. Provide additional information for responses to questions on Schedule K (see instructions).									
Return Reference		Evolunation							

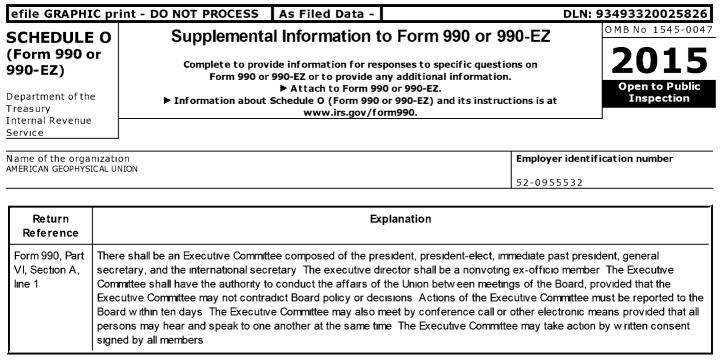
Return Reference

Explanation

Schedule K (Form 990) 2015

Date Rebate Computation Issuer Name DISTRICT OF COLUMBIA Date the Rebate Computation was Performed 05/28/2015 Performed

Return Reference	Explanation
Schedule K, Part II, Line 13	The bonds were originally issued in 1993, and the building was substantially completed in 1994. The bonds were remarketed in 2006.



Return Reference	Explanation
Form 990, Part VI,	Two minor amendments to the bylaws occurred in 2015 1) Members can vote on the officer of each section and
Section A, line 4	focus group to which they belong 2) The vice chair of the Development Board shall be Union past president

Return Reference	Explanation
Form 990, Part VI, Section A, Inne 6	There shall be the following membership categories. A Member - Individuals who are professionally engaged in or associated with Earth and space science are eligible to become members of the Union Members shall be entitled to all rights and privileges of membership, including the right to receive publications and other materials, subscribe to Union journals, purchase Union publications at member rates as established by the Board of Directors, serve as elected officers of the Union, sections and focus groups, and vote on matters brought before the membership, B Fellow - A member who has attained acknowledged eminence in Earth and space science, and who has been elected by a committee of fellow's appointed by the president shall be inducted as a fellow. A member of the Union who is a recipient of an AGU medal shall automatically be made a fellow. The number of fellow's elected in each annual class shall not exceed 0.1% of the total membership at the end of the year preceding installation of that class, C. Honorary Fellow. A person who has provided services to the Union or made exceptional contributions to the fields of Earth and space science may be elected an honorary fellow by the Council, D. Associate. An individual who desires identification with the Union and wishes to support its objectives but does not meet the qualifications of membership may become an associate. Associate members may not vote or hold office, but shall otherwise have all of the rights of membership, and E. Affiliate. A corporation, academic institution, or other organization interested in Earth and space science may designate a representative to become an affiliate. The designated representative shall enjoy the privileges of a member.

Return Reference	Explanation
Form 990, Part VI,	ALL ELIGIBLE MEMBERS MAY VOTE TO ELECT THE UNION OFFICERS (PRESIDENT, INTERNATIONAL SECRETARY AND
Section A, line 7a	GENERAL SECRETARY/TREASURER) AND CAN VOTE IN UP TO THREE SECTIONS OF THEIR CHOICE TO ELECT SECTION PRESIDENTS

Return Reference	Explanation
Form 990, Part VI,	THE EXECUTIVE COMMITTEE OF THE BOARD REVIEWS THE 990 IN DEPTH WITH THE CEO, COO, AND CFO OF AGU THE
Section B, line 11	ENTIRE BOARD OF DIRECTORS IS GIVEN THE OPPORTUNITY TO REVIEW AND COMMENT ON AN ELECTRONIC COPY OF
	THE FORM 990 PRIOR TO ITS FILING WITH THE INTERNAL REVENUE SERVICE

Return Reference	Explanation
Form 990, Part VI, Section B, line 12c	IF AN OFFICER, DIRECTOR, TRUSTEE OR EMPLOYEE HAS ANY INDICATION THAT HE OR SHE HAS A DIRECT OR INDIRECT CONFLICT OF INTEREST, OR RECEIVES INFORMATION REGARDING A POTENTIAL CONFLICT OF INTEREST OF ANOTHER, THE CEO, COO AND DIRECTOR OF HUMAN RESOURCES MUST BE IMMEDIATELY NOTIFIED ALL AGU OFFICERS, DIRECTORS, TRUSTEES, AND COMMITTEE MEMBERS ARE REQUIRED TO SIGN A CONFLICT OF INTEREST AT THE START OF THEIR TENURE EMPLOYEES ARE REQUIRED TO SIGN A CONFLICT OF INTEREST POLICY AT THE START OF EMPLOYMENT EMPLOYEES AND VOLUNTEERS ARE ASKED TO REVIEW AND UPDATE THEIR CONFLICT OF INTEREST STATEMENT ANNUALLY IF NECESSARY

Return Reference	Explanation
Form 990, Part	15A - CEO COMPENSATION IS ESTABLISHED USING THE METHODS INDICATED ON SCHEDULE J, PART I, LINE 3
VI, Section B,	COMPENSATION OF THE EXECUTIVE DIRECTOR WAS LAST REVIEWED BY THE EXECUTIVE COMMITTEE OF THE AGU BOARD $\ $
line 15	IN FEBRUARY 2015 15B - COMPENSATION OF OTHER OFFICERS OR KEY EMPLOYEES IS DETERMINED USING AN
	INDEPENDENT COMPENSATION CONSULTANT, COMPENSATION SURVEYS, AND FORM 990 COMPARISON DATA
	COMPENSATION APPROVAL FOR AGU OFFICERS AND KEY EMPLOYEES IS THE RESPONSIBILITY OF THE CEO THE CEO
	shares the comparable market data on salary ranges with the Executive Committee

Return Reference	Explanation
Form 990, Part VI,	AGU'S GOVERNING DOCUMENTS AND CONFLICT OF INTEREST POLICY ARE AVAILABLE TO THE PUBLIC ONLINE
Section C, line 19	AT WWW AGU ORG AND FINANCIAL STATEMENTS ARE AVAILABLE UPON REQUEST

Return Reference	Explanation
Form 990, Part IX,	other professional fees Program service expenses 1,588,157 Management and general expenses 2,375,658
line 11g	Fundraising expenses 355,140 Total expenses 4,318,955

Return Reference	Explanation
PART IX, LINE 24	THERE IS AN ALLOCATION OF OVERHEAD INCLUDED ON FORM 990, PART IX, LINE 24, COLUMNS (B), (C), AND (D) THAT IS NOT ALLOCABLE TO ANY NATURAL EXPENSE LINE ITEM IN PART IX, BUT RATHER IS ALLOCABLE IN A GENERAL FASHION TO THE ORGANIZATION'S PROGRAM SERVICE ACTIVITIES AS REPORTED IN ITS AUDITED FINANCIAL STATEMENTS THIS ALLOCATION WAS MADE SO AS TO BETTER ALIGN TOTAL PROGRAM SERVICE EXPENSES WITH THE ORGANIZATION'S AUDITED FINANCIAL STATEMENTS, WHICH FAIRLY REPORT THE ORGANIZATION'S PROGRAM SERVICE EXPENDITURES

Return Reference	Explanation
Form 990, Part XI, line 9	NET GAIN ON INTEREST RATE COLLAR 91,015 CHANGE IN POST-RETIREMENT BENEFITS 1,861,069

Return Reference	Explanation
Form 990 Part IX Line 2c	The oversight process remains unchanged from the prior year